

REQUEST FOR MORTGAGE ASSISTANCE FORM



We're ready to work with you to find a solution as quickly as possible. Filling out this form will give us the information we need to understand your current situation.

Loan Number: _____

Step 1: Tell us about you

We need the information in this section to start to review your application. Please make sure to fill it out completely.

For the purposes of this form, a "Customer" is someone who is obligated on the Note for the loan or interested in assuming responsibility for the Note. If another person not on the Note has community property or similar rights per applicable state law, please provide their name: _____

Customer		Co-Customer	
Customer's Name		Co-Customer's Name	
Last four digits of Social Security number	Date of Birth	Last four digits of Social Security number	Date of Birth
Mobile or Daytime Number With Area Code*		Mobile or Daytime Number With Area Code*	
Email Address		Email Address	

*By providing your mobile phone number(s), you are giving Chase and companies working on its behalf permission to contact you at this number about all your Chase or J.P. Morgan accounts. Your consent permits the use of text messaging, artificial or prerecorded voice messages and automatic dialing technology for informational or account servicing purposes, but not for telemarketing or sales. Message and data rates may apply. You may contact us at any time to change these preferences.

Step 2: Help us understand your unique situation

In this section, please let us know about the hardship you're experiencing by checking all boxes that apply.

HARDSHIP AFFIDAVIT

If your mortgage loan is insured or guaranteed by the Federal Housing Administration (FHA) or the Rural Housing Service (RHS), you are considered to be "facing imminent default" if your loan is up to date or less than 30 days past due and you have a hardship that will prevent you from making your next required payment on the mortgage loan during the month that it's due.

Describe your hardship: _____

Date situation began: ____/____/____ I believe that my situation is: Temporary Long Term

If your hardship is:	Then please provide:
<input type="checkbox"/> Unemployment	• A copy of your benefits statement or letter detailing the amount, frequency, and duration of your unemployment benefits
<input type="checkbox"/> FHA unemployed customers not currently receiving benefits Unemployment start date: _____	• Are you seeking new employment? <input type="checkbox"/> Yes <input type="checkbox"/> No • Are you available for employment? <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Income reduction/underemployment <input type="checkbox"/> Payment increase <input type="checkbox"/> Excessive obligations	• No hardship documentation is required as long as you have submitted the supporting income documentation
<input type="checkbox"/> Divorce or legal separation; separation of customers unrelated by marriage, civil union or similar domestic partnership under applicable law	• Divorce decree or separation agreement signed by the court; OR • Current credit report evidencing divorce, separation, or non-occupying customer has different address; OR • Recorded quitclaim deed evidencing that the non-occupying customer or co-customer has relinquished all rights to the property
<input type="checkbox"/> Death of a customer or death of either the primary or secondary wage earner in the household or dependent family member	• Death certificate; OR • Obituary or newspaper article reporting the death
<input type="checkbox"/> Long-term or permanent disability; serious illness of a customer, co-customer or dependent family member	Do not provide medical records or any details of your illness or disability • Written statement from you or other documentation verifying disability or illness; OR • Proof of monthly insurance benefits or government assistance (with expiration date, if applicable)
<input type="checkbox"/> Disaster (natural or man-made) adversely impacting the property or customer's place of employment	• Insurance claim; OR • FEMA grant or Small Business Administration loan; OR • Customer or employer property in a federally-declared disaster area
<input type="checkbox"/> Distant employment transfer	• Proof of transfer OR Military Permanent Change of Station (PCS)
<input type="checkbox"/> Business failure	• Tax return from the previous year (including all schedules) AND • Proof of business failure supported by one of the following: • Bankruptcy filing for the business; OR • Two months of recent bank statements for the business account evidencing cessation of business activity; OR • Most recent signed and dated quarterly or year-to-date profit and loss statement
<input type="checkbox"/> Other (please explain) _____	

Loan Number: _____

ADDITIONAL INFORMATION

I want to be reviewed for: All assistance options Only options that involve moving out of the property

This property is: Primary Residence (Owner-Occupied) Second Home Investment Property (Renter-Occupied)

Is any customer or occupant of the property a Servicemember, prior Servicemember, or a dependent of a Servicemember? Yes No

Number of people in household: _____ Number of vehicles: _____

Step 3: Detailed financial information

The information you give about your income, assets, and expenses will help us determine what options are available. Please fully complete the sections below.

MONTHLY HOUSEHOLD INCOME

Gross Wages #1 Employment Start Date: ____/____/____ <i>If you are seasonal or in the education field, please indicate how many months per year you are paid: _____</i>	\$
Gross Wages #2 Employment Start Date: ____/____/____ <i>If you are seasonal or in the education field, please indicate how many months per year you are paid: _____</i>	\$
Self-Employment Income <i>(This includes 1099 based income)</i> Percentage of ownership: _____	\$
Tips, Commissions, Bonus	\$
Unemployment Income	\$
Social Security Benefits, Investments, Pensions or other Retirement Benefits	\$
Child Support/Alimony/Separation Maintenance*	\$
Gross Rents Received	\$
Food Stamps/Welfare	\$
Other (please explain) _____	\$
Total Monthly Income	\$

*You aren't required to disclose child support, alimony, or separation maintenance income, unless you want us to consider it as qualifying income.

HOUSEHOLD ASSETS

Please provide the most recent statement for EACH account listed

Checking Account #1	\$
Checking Account #2	\$
Savings/Money Market	\$
CDs	\$
Stocks/Bonds	\$
Other Cash on Hand	\$
Other Real Estate (estimated value)	\$
Other _____	\$
Total Assets	\$

LIENS, MORTGAGES OR JUDGMENTS (If applicable)

Is the 1st lien serviced by Chase: Yes No: If no, please provide:
 Servicer: _____ Account Number: _____
 Please list any additional liens associated with this property
 Servicer: _____ Account Number: _____
 Servicer: _____ Account Number: _____

ADDITIONAL CONTRIBUTOR INFORMATION (Optional)

Is there a person not on the account who resides in and contributes financially to the household? Yes No If yes:
 First and Last Name: _____
 Monthly amount contributed to the household (including amount contributed to the Mortgage): \$ _____
 If there are living expenses for this person, please indicate below.

If there is a contributor on the property, we will need an "Authorization to obtain consumer credit report" form. This can be found on our website (link on page 3). Additionally, please provide proof of the income.

MONTHLY LIVING EXPENSES

Living Expenses	Customer(s)	Contributor(s)
Food*	\$	\$
Utilities*	\$	\$
Automobile Expenses* (Insurance, maintenance and gas)	\$	\$
Life Insurance Premium	\$	\$
Clothing	\$	\$
Cable, Internet, Phone	\$	\$
Medical	\$	\$
Tuition/School	\$	\$
Child Care (daycare, babysitting)	\$	\$
Child Support/Alimony	\$	\$
Condominium or HOA fees Are the fees paid current? <input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$
Other (please explain) _____	\$	\$
Total Monthly Living Expenses	\$	\$

*Indicates a required field

Third Party Authorization:

Authorize someone to work with us for you (optional):
I/We hereby authorize JPMorgan Chase Bank, N.A. to release, furnish, and provide information related to my/our account to:

_____()_____-_____
Name of Third Party **Phone Number**

Address of Third Party

Loan Number: _____

Step 4 : If you have additional properties

If you own an additional property, please fill out the following section. If not, please move on to step 5.

OTHER PROPERTIES OWNED	
Customers with more than one additional property, please visit our website to download the "Schedule of Real Estate Owned" required form. Please see the link at the bottom of this page. When completed, please include the form with this application.	
Property Address: _____	Monthly Rents Received: \$ _____
1st Mortgage Servicer Name: _____	Loan Number: _____ Monthly Principal and Interest payment: \$ _____
2nd Mortgage Servicer Name _____	Loan Number: _____ Monthly Principal and Interest payment: \$ _____
Escrow payment (Taxes, Insurance and PMI): \$ _____ Property is: <input type="checkbox"/> Vacant <input type="checkbox"/> Second/Seasonal Home <input type="checkbox"/> Owner-Occupied <input type="checkbox"/> Rented	
Monthly Condominium or HOA fees: \$ _____	Comments: _____

Step 5: Please review carefully and sign

It's important that you review and understand the legal information in this section.

ACKNOWLEDGMENT AND AGREEMENT								
<u>In making this request for consideration, I certify under penalty of perjury that I understand and agree that:</u>								
<ol style="list-style-type: none"> The Servicer may pull current credit report on all customers obligated on the Note for the loan. If I was discharged in a Chapter 7 bankruptcy proceeding after the execution of Loan Documents, or am currently entitled to the protections of any automatic stay in bankruptcy, the Servicer is providing information about the mortgage assistance program at my request and for informational purposes, and not as an attempt to impose personal liability for the debt evidenced by the Note. If I am eligible for a Trial Period Plan, Repayment Plan or Forbearance Plan, and I accept and agree to all terms of such plan, I also agree that the terms of this Acknowledgment and Agreement are incorporated into such plan. If I'm eligible for an assistance option that requires an escrow account to pay taxes and/or insurance and my loan didn't have one, the Servicer may establish one. If my loan previously had an escrow account and the Servicer agreed to remove this requirement, this agreement has been revoked. All of the information in this document is true and the hardship(s) explained in Step 2 is the reason(s) I'm requesting mortgage assistance. The Servicer, owner or guarantor of my mortgage or their agents may investigate the accuracy of my statements and I may need to provide additional documentation. If I have intentionally defaulted on my existing mortgage, engaged in fraud, or if any of the information I've provided is false, I may not be eligible for assistance under applicable investor/insurer programs or guidelines. This includes eligibility to any future benefits and incentives that would have otherwise been available. This also may include other remedies available, such as recovering any benefits or incentives previously received. The property securing the mortgage I'm requesting assistance for is able to be lived in and hasn't been or isn't at risk of being condemned. The Servicer will use the information I am providing to determine if I'm eligible for mortgage assistance, but isn't obligated to offer me assistance based solely on the statements in this or any other document I've sent as part of this request. The Servicer will collect and record personal information, including, but not limited to: my name, address, phone number, Social Security number, credit score, income, payment history and information about account balances and activity. I understand and consent to the disclosure of my personal information and the terms of any mortgage assistance option I receive by the Servicer to (a) any investor, insurer, guarantor or Servicer that owns, insures, guarantees or services my mortgage loan(s); (b) companies that perform support services in conjunction with any other mortgage relief program; and (c) any HUD-certified housing counselor. If I, or someone on my behalf, have submitted a Fair Debt Collection Practices Act Cease and Desist notice to my Servicer, I withdraw that notice and understand that the Servicer must contact me throughout the mortgage assistance process. I consent to being contacted about this request for mortgage assistance at any email address I have provided to the lender. 								
<u>By signing this document, I/we certify that all the information is truthful. I/We understand that knowingly submitting false information may constitute fraud.</u>								
<table border="0"> <tr> <td>_____</td> <td>_____</td> </tr> <tr> <td>Customer Signature</td> <td>Date</td> </tr> <tr> <td>_____</td> <td>_____</td> </tr> <tr> <td>Co-Customer Signature</td> <td>Date</td> </tr> </table>	_____	_____	Customer Signature	Date	_____	_____	Co-Customer Signature	Date
_____	_____							
Customer Signature	Date							
_____	_____							
Co-Customer Signature	Date							

Step 6: Here's how to send your documents

When we receive this form and all required documents, we'll assign a team of dedicated specialists to your loan and call you within five business days to talk about your next steps.

Here are the different ways you can send in your information. After you've submitted your documentation, please give us a call at 1-877-496-3138 to let us know.	Overnight Mail:	Regular Mail:	Fax:
	710 South Ash St., STE 200 Glendale, CO 80246-1989	P.O. Box 469030 Glendale, CO 80246-9030	1-866-282-5682 Online: chase.com

If you have questions about this document or the general modification process, please call your Servicer. If you have questions about government programs that your Servicer cannot answer or need further counseling, you can call the Homeowner's HOPE™ Hotline at 888-995-HOPE (4673). The Hotline can help answer questions about the program and offers free HUD-certified counseling services in English and Spanish.



For any additional forms needed, please visit chase.com/MortgageAssistance