

## Statement of Total Assets and Liabilities

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Social Security # \_\_\_\_\_

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Social Security # \_\_\_\_\_

Combined assets and Liabilities for the above named individual(s) for the tax year of:

For assets, enter your best estimate of the current value.

For liabilities, enter the total amount you owe.

### Assets

House	_____	
Other Property	_____	
Auto 1	_____	
Auto 2	_____	
Boat	_____	
Motor Home	_____	
Off Road Veh(s)	_____	
Bank & Savings	_____	
Cash	_____	<i>Description</i>
Other 1	_____	_____
Other 2	_____	_____
Total	_____	

### Liabilities

House	_____	
Other Property	_____	
Auto 1	_____	
Auto 2	_____	
Boat	_____	
Motor Home	_____	
Off Road Veh(s)	_____	
Credit Cards	_____	<i>Description</i>
Other 1	_____	_____
Other 2	_____	_____
Other 3	_____	_____
Total	_____	

Total Assets - Total Liabilities (Net Worth) \_\_\_\_\_

# Financial Statement

e-mail

Print Form

## Hardship Acknowledgement

Name \_\_\_\_\_ Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

What is the primary reason for your hardship? (Select **ONLY ONE** option which best describes your situation)

- |  |  |
|--|--|
| <input type="radio"/> Death of Mortgagor                   | <input type="radio"/> Inability To Sell Property |
| <input type="radio"/> Illness of Mortgagor                 | <input type="radio"/> Inability To Rent Property |
| <input type="radio"/> Illness of Mortgagor's Family Member | <input type="radio"/> Military Service           |
| <input type="radio"/> Death of Mortgagor's Family Member   | <input type="radio"/> Business Failure           |
| <input type="radio"/> Marital Difficulties                 | <input type="radio"/> Incarceration              |
| <input type="radio"/> Reduction of Income                  | <input type="radio"/> Natural Disaster or Fire   |
| <input type="radio"/> Excessive Obligations                | <input type="radio"/> Other _____                |
| <input type="radio"/> Abandonment of Property              | Explain _____                                    |
| <input type="radio"/> Distant Employment Transfer          |  |

Military Service Follow Up Question:

Are You Currently On Active Deployment?

Yes  No

What Date Did Your Hardship Begin? \_\_\_\_\_ Is The Hardship temporary?  Yes  No

Do You Have A Credit Counselor?  Yes  No Agency Name \_\_\_\_\_ Phone Number \_\_\_\_\_

How Many People Live In Your Household? \_\_\_\_\_ How Many Dependents Live In Your Household? \_\_\_\_\_

### About The Property

What is the primary purpose of the property? (select **ONE** option which best describes what the property is used for)

- Primary Residence  Second Home  Investment Property

Lender #1 \_\_\_\_\_ Loan # \_\_\_\_\_ Monthly Pymt. \_\_\_\_\_

Approximate Unpaid Balance \_\_\_\_\_ Interest Rate \_\_\_\_\_ Is The Property In Foreclosure?  Yes  No  Don't Know

Loan Type (if known)  FHA  VA  Freddie Mac  Fannie Mae  Private Lender

Lender #2 \_\_\_\_\_ Loan # \_\_\_\_\_ Monthly Pymt. \_\_\_\_\_

Approximate Unpaid Balance \_\_\_\_\_ Interest Rate \_\_\_\_\_ Is The Property In Foreclosure?  Yes  No  Don't Know

Loan Type (if known)  FHA  VA  Freddie Mac  Fannie Mae  Private Lender

Is the property occupied by owners, occupied by renters, or vacant? (select **ONE** option which best describes the occupancy status)

Owner Occupied  Renter Occupied  Vacant

Are Renters Paying To Occupy The Property?  Yes  No

If Vacant, Are the Utilities On And The Property Secured?  Yes  No

Do You Intend To Keep The Property?  Yes  No Is The Property Currently For Sale?  Yes  No

Listing Price: \_\_\_\_\_ Date Listed \_\_\_\_\_ Have You Received An Offer ON The Property?  Yes  No

Date Of Offer \_\_\_\_\_ Offer Amount \_\_\_\_\_ Are You Using A Real Estate Broker?  Yes  No

Broker/Agency Name: \_\_\_\_\_ Phone Number \_\_\_\_\_

## Household Income

List any income from any members of the household who contribute to the mortgage. **Indicate "self" if you are self employed.**

Name of Individual _____	Employer _____
Wages Less Deductions _____	Payment Schedule <input type="radio"/> Weekly <input type="radio"/> Biweekly <input type="radio"/> Twice A Month <input type="radio"/> Monthly
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Name of Individual _____	Employer _____
Wages Less Deductions _____	Payment Schedule <input type="radio"/> Weekly <input type="radio"/> Biweekly <input type="radio"/> Twice A Month <input type="radio"/> Monthly

## Other Monthly Income

Overtime / Commissions / Bonuses _____	Dividends / Royalties _____
Child Support Received _____	Unemployment _____
Alimony Received _____	SSI / Disability _____
Rental Income _____	Welfare / Food Stamps _____
Tips / Other Income _____	Other Income _____

## Monthly Expenses

Total Amount Paid On All Car Payments _____	Monthly Alimony Paid _____
Total Amount Paid On All Credit Cards _____	Monthly Child Support Paid _____
Total Amount Paid On Other Loans / Credit Lines _____	Storage / Space Rental _____
Monthly Boat / Motorcycle Payments _____	Office Space _____

## Monthly Living Expenses

Food _____	Car / Vehicle Insurance _____
Child Care _____	Health Insurance _____
Clothing _____	Life Insurance _____
Total Gas & Electric Combined _____	Property Insurance _____
Water / Sewer/ Garbage _____	Property Taxes _____
House & Cell Phones Combined _____	Cable / Satellite / Internet _____
Gas / Fuel (Vehicles) _____	Entertainment _____
SSI / Disability _____	Charitable Contributions _____
Bus/ Transit/ Parking _____	Professional Dues / Subscriptions _____
HOA Dues / Fees _____	Continuing Education _____
All Medical Bills Combined _____	Pest / Swimming Pool Service _____
All Prescription Drugs Combined _____	House / Auto Repairs _____

**Assets**

Provide details of any properties you own:

Property Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Is There A Loan On This Property?  Yes  No Lender's Name \_\_\_\_\_

Monthly Payment \_\_\_\_\_ Months Delinquent \_\_\_\_\_ Approximate Unpaid Balance \_\_\_\_\_ Approximate Value \_\_\_\_\_

Property Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Is There A Loan On This Property?  Yes  No Lender's Name \_\_\_\_\_

Monthly Payment \_\_\_\_\_ Months Delinquent \_\_\_\_\_ Approximate Unpaid Balance \_\_\_\_\_ Approximate Value \_\_\_\_\_

List Any Automobiles You Have Completely Paid Off:

Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ Estimated Value \_\_\_\_\_

Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ Estimated Value \_\_\_\_\_

Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ Estimated Value \_\_\_\_\_

List any other significant assets such as boats, RVs, valuable collections, jewelry or other real estate not previously reported.

Item Description \_\_\_\_\_ Estimated Value \_\_\_\_\_

Item Description \_\_\_\_\_ Estimated Value \_\_\_\_\_

**Cash & Account Balances**

Cash On Hand _____	Cash Value Of Life Insurance _____
Checking Account Balance _____	401k / Retirement Acct Balance(s) _____
All Savings Account Balances _____	CDs / Stocks / Mutual Funds _____

**AUTHORIZATION AND ACKNOWLEDGEMENT**

I/we certify that all information presented herein as well as attachments are true, accurate and correct to the best of my knowledge.

Borrower \_\_\_\_\_ Date \_\_\_\_\_

Co-borrower \_\_\_\_\_ Date \_\_\_\_\_