

<b>Loan #:</b>		
Borrower:	Res. Tel. #:	Work Tel. #:
Social Security Number:		
Co-Borrower:	Res. Tel. #:	Work Tel. #:
Social Security Number:		
Property Address:		
City:	State:	Zip Code:
Current Address (if different from property address – do not use post office box):		
City:	State:	Zip Code:

Total number of dependents: \_\_\_\_\_  
 Have you contacted any HUD-approved credit or housing counselors? \_\_\_\_\_  
 Is your home listed for sale? \_\_\_\_\_  
 If yes, who is your agent? \_\_\_\_\_

Borrower Employment History	Co-Borrower Employment History
Currently Employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	Currently Employed? <input type="checkbox"/> Yes <input type="checkbox"/> No
How Long? _____	How Long? _____
Present Employer:	Present Employer:
Position/Title:	Position/Title:
If self-employed, name of co.:	If self-employed, name of co.:

Description	Monthly Income		Total
	Borrower	Co-Borrower	
Social Security Number			
Gross Salary/Wages	\$	\$	\$
Unemployment Income (Benefit end date: _____ )	\$	\$	\$
Child Support/Alimony	\$	\$	\$
Disability Income	\$	\$	\$
Rental Income	\$	\$	\$
Interest/Dividend Income	\$	\$	\$

**ASSETS/LIABILITIES** – If you own real estate in addition to your personal residence, or if your personal residence is subject to one or more junior mortgages, attach a complete list of property addresses (if different from personal residence), name(s) of lender, lender’s address and phone number, account numbers, monthly payment, amount owed, and estimated value & rental income.

Description	Estimated Value	Amount Owed	Net Value
Personal Residence	\$	\$	\$
Personal Property	\$	\$	\$
Checking Accounts	\$	\$	\$
Savings Accounts	\$	\$	\$
IRA/401k/Keogh Accounts	\$	\$	\$
Stocks/Bonds/CD's	\$	\$	\$
Cash Value of Life Insurance	\$	\$	\$
Other	\$	\$	\$
<b>Totals</b>	\$	\$	\$

**EXPENSES**

Description	Monthly Payment	Balance Due	Delinquent	
			Yes	No
Other Mortgages/Liens/Rents	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
Property Taxes	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
Hazard Insurance	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
Alimony/Child Support	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
Homeowner's Association Dues	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
Child Care	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
Health Insurance	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
Life Insurance Premiums	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
Uninsured Medical/Dental Expenses	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
Credit Card/Installment Loans	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
Student Loans	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
Auto Loan(s)	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
Auto Expenses/Gasoline/Insurance	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
Food/Spending Money	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
Water/Sewer/Utilities/Phone	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
State and/or Federal Tax Liens	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
Clothing and Dry Cleaning	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
Other	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>

I have described my present financial condition on this financial analysis form and have attached required documentation. Under my present circumstances, I cannot bring my mortgage loan current. Therefore, I hereby request assistance from American Home Mortgage Servicing, Inc. ("Servicer") under its loss mitigation program.

If Servicer determines that the information and/or documentation I have provided with this financial analysis form is incomplete, or insufficient to render a decision as to my eligibility for loss mitigation, my request for loss mitigation may be denied or delayed until I have provided Servicer with additional information and/or documentation as requested. If I have misrepresented any information and/or documentation, I understand and agree that such misrepresentation will be grounds either for immediate rejection of my request for assistance or immediate termination of any loss mitigation agreed to by Servicer. Furthermore, I shall be liable for any losses or damages suffered by Servicer as a result of such misrepresentation.

In the event a third party is designated to act on my behalf, I have included written authorization to the designee to act on my behalf. In the event I am able to bring the loan current or am able to sell the property for an amount sufficient to pay off my mortgage loan in full during the evaluation process, I understand that my request for participation in Servicer's loss mitigation program will be withdrawn without further action.

**By signing below, I declare under penalty of perjury that the information provided above is true and correct to the best of my knowledge.**

\_\_\_\_\_  
Signature of Borrower

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Borrower

\_\_\_\_\_  
Date

## REMINDER

Before mailing, make sure that all borrowers on the mortgage note have signed and dated this form. Also, include copies (for all Borrowers) of:

1. Last two months' pay stubs (or a copy of the past six-months' profit and loss statement, if self-employed);
2. Bank statements of checking and/or savings accounts;
3. The most recent tax return on file;
4. A signed Form 4506-T (Request for Transcript of Tax Return); and
5. If property is income/rental property, a copy of the current lease agreement(s).

**All borrowers on the mortgage note must sign this document or it will be rejected by Servicer. This is an attempt to collect a debt and any information obtained will be used for that purpose.**