

# Financial Hardship Affidavit

\_\_\_\_\_  
Borrower Name(s):

\_\_\_\_\_  
Property Street Address:

\_\_\_\_\_  
Property City, State, Zip:

\_\_\_\_\_  
Lender:

\_\_\_\_\_  
Loan Number:

In order to qualify for \_\_\_\_\_'s offer of a conditional Loan Workout and Modification Agreement, I am submitting this form to the Lender and indicating by my checkmarks ("✓") the one or more events that contributed to my inability to remain current on my mortgage loan.

Borrower Co-Borrower

My income has been reduced or lost. For example: unemployment, reduced job hours, reduced pay, decline in business earnings. Explain below.

My household financial circumstances have changed. For example: permanent or short-term disability, death in the family, divorce or separation, increased family responsibilities (birth or adoption of a child, taking care of elderly relatives or other family members). Explain below.

My expenses have increased. For example: my monthly mortgage payment will rise or has risen, high medical and health-care costs, uninsured losses (such as those due to fires or natural disasters), unexpectedly high utility bills. Explain below.

Other. Explain below.

Explanation:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Borrower Acknowledgement**

I verify that the events identified above have contributed to my inability to remain current on my mortgage loan. I understand and acknowledge that the Lender may investigate the accuracy of the event(s), and may require me to provide supporting documentation. I understand that if I have misrepresented the event(s) or do not provide the required documentation that the Lender may cancel this agreement and re-start foreclosure activities.

\_\_\_\_\_  
Borrower Signature:

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Email Address:

\_\_\_\_\_  
Cell Phone#:

\_\_\_\_\_  
Co-Borrower Signature:

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Email Address:

\_\_\_\_\_  
Cell Phone#: