Nationstar Mortgage, LLC Request for Financial Information (fill out entirely)

Loan #

Borrower		Co Borrower						
		Co-Borrower's Name Date of Birth						
Social Security #	Home Phone Work Phone	none		Social Securi	ty #	Home Phone Work Phone		
Property Address	WOIK FIIOIle	nc		Prop	erty Address	Work Phone		
Employment plea	ase provide last	nav stub fr	om each e	mnlover				
Employer:		Years of Emp		Employer:		Years of Emp:		
Title:	Gross pay per month	<u>ו</u> ו	How often paid?	Title:		Gross pay per mo	onth How often p weekly	paid?
Number of dependents	Net pay per month	\$0	Commission \$0	Number of dependents		Net pay per mont	h Commis \$0	sion
Misc:			Amount \$0	Misc:		Amount		
Dependents are non-	borrower(s) livir	ng in the re	sidence					
Monthly Expense	S							
		Miscellane	eous		Other			
Hazard Insurance		Health Insura	nce		Bank/Finance Loans	6	\$	-
Electric		Medical Bills			Charge Account (1)			
Phone		Food	(4)		Charge Account (2)		\$	-
Water & Sewer		Car Payment		¢	Camper, Boat, Motor Personal/Life Insurar	-	\$	-
Gas Home Maintenance		Car Payment Auto Insurano	. ,	\$-	Club/Union Dues	ice	\$ \$	-
Second Mortgage		Gas (auto)	26		Cable TV		φ	-
Home Owners Association	\$-	Auto Mainten	ance	\$-	Religious Contributio	ns	\$	-
Nationstar 1st Mortgage	•	Child Care		\$ -	Dry Cleaning	-	· ·	
Property Taxes		Child Support	t	\$-	Clothing			
cell phone		Alimony		\$-	Entertainment			
Rent		Public Trans		\$-	School Tuition			
Checking Account Balance		Savings Acco	ount Balance		Retirement, CD's, St	ocks, 401k, IRA, e	etc.	
\$	-	\$		-	\$			-
Monthly Net Income:		\$0		Disposabl	e Income:	\$0		
Monthly Debt:		\$0		DTI %:		#DIV/0	!	
		P	roperty li	oformatic				
Is the property your primary	racidance?	F	торенту п					_
Is this a rental or investmen				If Yes; With V	have home owners in:	surance?		
Is the property for sale?	r property:				property taxes?	Nor	ne	
If YES, what is the realtor's	name?			If Yes; How Much?		2003 200		
How long has the property b	been on the market?							
What is the property listed for	or?		\$					
What is the name and	number to the compa	any listing the p	property?	Name:		Tele	ephone:	
Current Value of Home	Date of Value			Original Val	ue	Date of Value	LTV	%
			anation fo	or Delinqu	uency			
Please check off event(s) th	-	behind in your	mortgage:		•			
Temporary La					Reduction in Hours	of Employment		
Too many oth					Illness/Injury Expensive repairs :(vohiele/proporty/		
Divorce/Sepa Job Loss	lation				Other: (requires deta			
Explanation:								
							_	
							Revised 9/1	9/07



Nationstar Mortgage LLC 350 Highland Drive Lewisville, TX 75067

Short Sale Third Party Authorization Form

Property Address:

Nationstar Loan Number: _

Borrower(s) Acknowledgment

I the undersigned borrower and co-borrower (if any) (individually and collectively, the "Borrower", "Me" or "My") hereby authorize(s) Nationstar Mortgage LLC (Nationstar), its employees, affiliates, agents or subcontractors to release and/or discuss any personal private financial information related to the mortgage, mortgagor, or mortgaged property including but not limited to income, expenses, credit scores, status of any current or previous workout, account, balances, program eligibility, payment activity and any other confidential (including nonpublic information) information with the Designated Representative and the support staff of the Designated Representative as identified on page 2, title company, represented attorney or escrow company as required for the consummation of the Short Sale.

I further agree and acknowledge as follows:

- I acknowledge that Nationstar is not responsible for any act or omission of the Designated Representative, including anything the Designated Representative may do with information it is provided hereafter, or for any failure of the Designated Representative to competently perform its services.
- I agree that the Designated Representative can authorize a delegate to provide administrative support to facilitate procedural, or other clerical and administrative functions that are non-licensable activities on behalf of the Designated Representative.

This Third-Party Authorization shall remain in effect until completion of a Short Sale unless revoked in whole or part by me (us) in a written communication to Nationstar Mortgage, Attn: Account Resolution, 350 Highland Drive, Lewisville TX 75067.

I UNDERSTAND AND AGREE WITH THE TERMS OF THIS THIRD-PARTY AUTHORIZATION.

Borrower Signature	Last 4 of SSN	Date	Co-Borrower Signature	Last 4 of SSN	Date
Printed Name			Printed Name		

Designated Representative Acknowledgment

The Designated Representative represents and agrees that, he/she (i) is a licensed real estate agent, real estate broker, or attorney ("Licensee") in good standing in the state in which the property is located, and that the Licensee has all licenses, permits or authorizations required by state or federal law to perform the duties undertaken by it in connection with the short sale, (ii) shall not knowingly misrepresent or omit to state any material fact in order to induce the Borrower(s), Lender, Investor, or the Insurer to agree to terms of a short sale that the Borrower(s), Lender, Investor, or the Insurer would not have agreed to had all material facts been known, and (iii) is in compliance with all applicable state and federal laws, rules, and regulations governing the services provided, including without limitation those related to providing required disclosures to the Borrower(s), and shall be responsible and liable for all acts and omissions of its Designated Support Staff delegated to work on his/her behalf.





Short Sale Third Party Authorization Form (Con't)

Each Designated Representative and his/her Designated Support Staff involved in a Short Sale regarding property below:

Address	City		State	Zip Code		
Designated Representative: Phone:						
Designated Representative Signated	ture	Date				
Designated Representative: Phone:		Company N Email:				
Designated Representative Signated	ture	Date				
Designated Representative: Phone:						
Designated Representative Signature		Date	Date I Estate Agent/Broker's License nor an Attorney's			
License but is assisting the abo		-		-		
Designated Support Staff: Phone:						
Designated Representative Signal	ture	Date				
Designated Support Staff: Phone:			Company Name: Email:			

Designated Representative Signature

Date

Borrower(s) confirms the Designated Representative and his/her Designated Support Staff above:

Borrower Signature

Date

Co-Borrower Signature Date



DATE

Property Address:_____

City, State, Zip: _____

I/We _____ Decline from any Retention programs I/We do not want to keep the property. I/We want to SHORT SALE the Property.

Borrower 1 signature: _____

Borrower 2 signature:______ if applicable



		HANDSHII	AFFIDAVIT		
Loan I.D. Number			Servicer		
	BORROWER			CO-BORROV	VER
Borrower's name		Co-borrower's name			
Social Security Numb	er		Social Security Num	ber	
Property address (incl	ude city, state and zip):				
I want to:	Keep the Property	Sell the Prop	perty		
The property is my:	Principal Residence	Second Hon	ne / Seasonal Rental	Year-Round F	Rental
The property is:	Owner Occupied	Tenant Occu	upied	Vacant	Other
		HARDSHIP	AFFIDAVIT		
	me has been reduced. For exan business earnings, death, disal				essive and I am overextended edit cards, home equity or othe

or hours, decline in business earnings, death, disability or divorce of a borrower or co-borrower.	debt. My cash reserves, including all liquid assets, are insufficient to		
My expenses have increased. For example: monthly mortgage payment reset, high medical or health care costs, uninsured losses, increased utilities or property taxes.			
I am unemployed and (a) I am receiving/will receive unemployment benefits or (b) my unemployment benefits ended less than 6 months ago.	Other:		

Borrower 1

Borrower 2

Date

Making Home Affordable Program Hardship Affidavit



HARDSHIP AFFIDAVIT page 1

COMPLETE ALL THREE PAGES OF THIS FORM

Loan I.D. Number	Servicer			
BORROWER	CO-BORROWER			
Borrower's name	Co-borrower's name			
Social Security Number	Social Security Number			
Property address (include city, state and zip):				
I want to:	perty			
The property is my: Principal Residence Second Hon	ne / Seasonal Rental 🛛 Year-Round Rental			
The property is: Owner Occupied Tenant Occu	upied 🗌 Vacant 🗌 Other			
HARDSHIP	AFFIDAVIT			
	e Making Home Affordable (MHA) Program. use of financial difficulties created by (check all that apply):			
My household income has been reduced. For example: reduced pay or hours, decline in business earnings, death, disability or divorce of a borrower or co-borrower.	☐ My monthly debt payments are excessive and I am overextended with my creditors. Debt includes credit cards, home equity or other debt.			
My expenses have increased. For example: monthly mortgage payment reset, high medical or health care costs, uninsured losses, increased utilities or property taxes.	My cash reserves, including all liquid assets, are insufficient to maintain my current mortgage payment and cover basic living expenses at the same time.			
I am unemployed and (a) I am receiving/will receive unemployment benefits or (b) my unemployment benefits ended less than 6 months ago.	□ Other:			
Explanation (continue on back of page 3 if necessary):				
Have you filed for bankruptcy? Yes No If yes: Chapter 7 Has your bankruptcy been discharged? Yes No Bankruptcy been discharged?	Chapter 13 Filing Date:			
How many single-family properties, other than your personal residence, individually, jointly, or with others?	do you and/or your co-borrower(s) own			
Has the mortgage on your principle residence ever had a Home Affordable Modification Program (HAMP) trial-period plan or permanent modification?				
Has the mortgage or any other property that you or any co-borrower own had a permanent HAMP modification? \Box Yes \Box No If "Yes", how many?				
DODD-FRANK CERTIFICATION				
from the Making Home Affordable Program, authorized under the Emer other mortgage assistance program authorized or funded by that Act, if s	ordance with the Dodd-Frank Wall Street Reform and Consumer Protection aw provides that no person shall be eligible to begin receiving assistance gency Economic Stabilization Act of 2008 (12 U.S.C. 5201 et seq.), or any uch person, in connection with a mortgage or real estate transaction, has a) felony larceny, theft, fraud, or forgery, (B) money laundering or (C) tax			

I/we certify under penalty of perjury that I/we have not been convicted within the last 10 years of any one of the following in connection with a mortgage or real estate transaction:

(a) felony larceny, theft, fraud, or forgery,(b) money laundering or(c) tax evasion.

evasion.

I/we understand that the servicer, the U.S. Department of the Treasury, or their respective agents may investigate the accuracy of my statements by performing routine background checks, including automated searches of federal, state and county databases, to confirm that I/we have not been convicted of such crimes. I/we also understand that knowingly submitting false information may violate Federal law.

This certification is effective on the earlier of the date listed below or the date this hardship affidavit is received by your servicer.

RENTAL PROPERTY CERTIFICATION

You must complete this certification if you are requesting a mortgage modification with respect to a rental property.

By checking this box and initialing below, I am requesting a mortgage modification under MHA with respect to the rental property having the address set forth above and I hereby certify under penalty of perjury that each of the following statements is true and correct with respect to that property:

1. I intend to rent the property to a tenant or tenants for at least five years following the effective date of my mortgage modification. I understand that the servicer, the U.S. Department of the Treasury, or their respective agents may ask me to provide evidence of my intention to rent the property during such time. I further understand that such evidence must show that I used reasonable efforts to rent the property to a tenant or tenants on a year-round basis, if the property is or becomes vacant during such five-year period.

Note: The term "reasonable efforts" includes, without limitation, advertising the property for rent in local newspapers, websites or other commonly used forms of written or electronic media, and/or engaging a real estate or other professional to assist in renting the property, in either case, at or below market rent.

2. The property is not my secondary residence and I do not intend to use the property as a secondary residence for at least five years following the effective date of my mortgage modification. I understand that if I do use the property as a secondary residence during such five-year period, my use of the property may be considered to be inconsistent with the certifications I have made herein.

Note: The term "secondary residence" includes, without limitation, a second home, vacation home or other type of residence that I personally use or occupy on a part-time, seasonal or other basis.

3. I do not own more than five (5) single-family homes (i.e., one-to-four unit properties) (exclusive of my principal residence).

Notwithstanding the foregoing certifications, I may at any time sell the property, occupy it as my principal residence, or permit my legal dependent, parent or grandparent to occupy it as their principal residence with no rent charged or collected, none of which will be considered to be inconsistent with the certifications made herein.

This certification is effective on the earlier of the date listed below or the date the Hardship Affidavit is received by your servicer.

Initials: Borrower _____ Co-borrower _____

INFORMATION FOR GOVERNMENT MONITORING PURPOSES

The following information is requested by the federal government in order to monitor compliance with federal statutes that prohibit discrimination in housing. You are not required to furnish this information, but are encouraged to do so. The law provides that a lender or servicer may not discriminate either on the basis of this information, or on whether you choose to furnish it. If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation. If you do not furnish ethnicity, race, or sex, the lender or servicer is required to note the information on the basis of visual observation or surname if you have made this request for a loan modification in person. If you do not wish to furnish the information, please check the box below.

BORROWER	I do not wish to furnish this information		CO-BORROWER	I do not wish to furnish this information
Ethnicity:	 Hispanic or Latino Not Hispanic or Latino 		Ethnicity:	Hispanic or Latino Not Hispanic or Lating
		rLatino		Not Hispanic or Latino
Race:	🗌 American India	n or Alaska Native	Race:	American Indian or Alaska Native
	🗆 Asian			🗆 Asian
	Black or Africar	n American		Black or African American
	🗆 Native Hawaiia	n or Other Pacific Islander		Native Hawaiian or Other Pacific Islander
	White			□ White
Sex:	Female		Sex:	Female
	Male			Male
	To be	completed by interviewer		Name/Address of Interviewer's Employer
This request was taken by: Interviewer's Name (print or type) &		ID Number		
□ Face-to-face interview □ Mail		Interviewer's Signature Date		
□ Telephone Interview □ Interview		Interviewer's Phone Number (includ	e area code)	

COMPLETE ALL THREE PAGES OF THIS FORM

ACKNOWLEDGEMENT AND AGREEMENT

- That all of the information in this document is truthful and the event(s) identified on page 1 is/are the reason that I need to request a modification or 1. forbearance of the terms of my mortgage loan, short sale or deed-in-lieu of foreclosure.
- 2. I understand and acknowledge that the Servicer, the U.S. Department of the Treasury, the owner or guarantor of my mortgage loan, or their respective agents may investigate the accuracy of my statements, may require me to provide additional supporting documentation and that knowingly submitting false information may violate Federal or other applicabale law.
- 3. I authorize and give permission to the Servicer, the U.S. Department of the Treasury, and their respective agents, to assemble and use a current consumer report on all borrowers obligated on the loan, to investigate each borrower's eligibility for MHA and the accuracy of my statements and any documentation that I provide in connection with my request for assistance. I understand that these consumer reports may include, without limitation, a credit report, and be assembled and used at any point during the application process to assess each borrower's eligibility thereafter.
- 4. I understand that if I have intentionally defaulted on my existing mortgage, engaged in fraud or if it is determined that any of my statements or any information contained in the documentation that I provide are materially false and that I was ineligible for assistance under MHA, the Servicer, the U.S. Department of the Treasury, or their respective agents may terminate my participation in MHA, including any right to future benefits and incentives that otherwise would have been available under the program, and also may seek other remedies available at law and in equity, such as recouping any benefits or incentives previously received.
- 5. I certify that any property for which I am requesting assistance is a habitable residential property that is not subject to a condemnation notice.
- 6. I certify that I am willing to provide all requested documents and to respond to all Servicer communications in a timely manner. I understand that time is of the essence.
- 7. I understand that the Servicer will use the information I provide to evaluate my eligibility for available relief options and foreclosure alternatives, but the Servicer is not obligated to offer me assistance based solely on the representations in this document or other documentation submitted in connection with my request.
- I am willing to commit to credit counseling if it is determined that my financial hardship is related to excessive debt. 8.
- 9. If I am eligible for assistance under MHA, and I accept and agree to all terms of an MHA notice, plan, or agreement, I also agree that the terms of this Acknowledgment and Agreement are incorporated into such notice, plan, or agreement by reference as if set forth therein in full. My first timely payment, if required, following my servicer's determination and notification of my eligibility or pregualification for MHA assistance will serve as my acceptance of the terms set forth in the notice, plan, or agreement sent to me.
- 10. I understand that my Servicer will collect and record personal information that I submit in this Hardship Affidavit and during the evaluation process, including, but not limited to, my name, address, telephone number, social security number, credit score, income, payment history, government monitoring information, and information about my account balances and activity. I understand and consent to the Servicer's disclosure of my personal information and the terms of any MHA notice, plan or agreement to the U.S. Department of the Treasury and its agents, Fannie Mae and Freddie Mac in connection with their responsibilities under MHA, companies that perform support services in conjunction with MHA, any investor, insurer, guarantor, or servicer that owns, insures, guarantees, or services my first lien or subordinate lien (if applicable) mortgage loan(s) and to any HUD-certified housing counselor.
- 11. I consent to being contacted concerning this request for mortgage assistance at any e-mail address or cellular or mobile telephone number I have provided to the Servicer. This includes text messages and telephone calls to my cellular or mobile telephone.

The undersigned certifies under penalty of perjury that all statements in this document are true and correct.

Borrower Signature	Social Security Number	Date of Birth	Date
Co-borrower Signature	Social Security Number	Date of Birth	Date

HOMEOWNER'S HOTLINE

If you have questions about this document or the Making Home Affordable Program, please call your servicer.



HOPETM Hotline at 1-888-995-HOPE (4673). The Hotline can help with questions about the program and offers free HUD-certified counseling services in English and Spanish.

NOTICE TO BORROWERS

Be advised that by signing this document you understand that any documents and information you submit to your servicer in connection with the Making Home Affordable Program are under penalty of perjury. Any misstatement of material fact made in the completion of these documents including but not limited to misstatement regarding your occupancy of your property, hardship circumstances, and/or income, expenses, or assets will subject you to potential criminal investigation and prosecution for the following crimes: perjury, false statements, mail fraud, and wire fraud. The information contained in these documents is subject to examination and verification. Any potential misrepresentation will be referred to the appropriate law enforcement authority for investigation and prosecution. By signing this document you certify, represent and agree that: "Under penalty of perjury, all documents and information I have provided to my Servicer in connection with the Making Home Affordable Program, including the documents and information regarding my eligibility for the program, are true and correct."

If you are aware of fraud, waste, abuse, mismanagement or misrepresentations affiliated with the Troubled Asset Relief Program, please contact the SIGTARP Hotline by calling 1-877-SIG-2009 (toll-free), 202-622-4559 (fax), or www.sigtarp.gov and provide them with your name, our name as your servicer, your property address, loan number and the reason for escalation. Mail can be sent to Hotline Office of the Special Inspector General for Troubled Asset Relief Program, 1801 L St. NW, Washington, DC 20220



Beware of Foreclosure Rescue Scams. Help is FREE! There is never a fee to get assistance or information about the Making Home Affordable Program from your lender or a HUD-approved housing counselor.

Beware of any person or organization that asks you to pay a fee in exchange for housing counseling services or modification of a delinquent loan Beware of anyone who says they can "save" your home if you sign or transfer over the deed to your house. Do not sign over the deed to your property to any organization or individual unless you are working directly with your mortgage company to forgive your debt.

Never make your mortgage payments to anyone other than your mortgage company without their approval.