

LOSS MITIGATION APPLICATION FORM		COMPLETE ALL PAGES OF THIS FORM	
BORROWER		CO-BORROWER	
Borrower's Name:		Co-Borrower's Name:	
Social Security Number:		Social Security Number:	
Date of Birth:		Date of Birth:	
Property Address:		Best Phone Number:	
		Email Address:	
I want to: <input type="checkbox"/> Keep the Property <input type="checkbox"/> Sell the Property <input type="checkbox"/> Vacate the Property			
The property is my: <input type="checkbox"/> Primary Residence <input type="checkbox"/> Second Home <input type="checkbox"/> Investment Property			
The property is: <input type="checkbox"/> Owner Occupied <input type="checkbox"/> Renter Occupied <input type="checkbox"/> Vacant			
IF SELLING THE PROPERTY			
Is the property listed for sale? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, what is the listing date?			
If the property has been listed, do you have an offer on the property? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Date of the offer:		Amount of the offer:	
Agent's Name:		Agent's Number:	
Is property For Sale by Owner? <input type="checkbox"/> Yes <input type="checkbox"/> No			
HOMEOWNER ASSOCIATION INFORMATION			
Do you have condominium or homeowner association (HOA) fees? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Total Monthly Payment:			
Name and Address fees are paid to:			
BANKRUPTCY INFORMATION			
Have you filed for bankruptcy? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, what is the filing date?	
If Yes? <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13			
Has your bankruptcy been discharged? <input type="checkbox"/> Yes <input type="checkbox"/> No		Bankruptcy Case Number:	
ACTIVE DUTY SERVICE MEMBER INFORMATION			
Is any borrower an active duty service member? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Has any borrower been deployed away from his/her primary residence or received a Permanent Change of Station order? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Is any borrower the surviving spouse of a deceased service member who was on active duty at the time of death? <input type="checkbox"/> Yes <input type="checkbox"/> No			
ADDITIONAL LIENS			
Do you have any additional liens on this property? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, please provide the below information:			
Lienholder Name:	Balance of Lien:	Payment Amount:	Account Number:
Lienholder Name:	Balance of Lien:	Payment Amount:	Account Number:
Lienholder Name:	Balance of Lien:	Payment Amount:	Account Number:

When completed mail to: OneMain  
 PO Box 969  
 Evansville, IN 47706-0969  
 or Fax to 1-888-202-6856  
 or email to [evvservicectr@sfs.com](mailto:evvservicectr@sfs.com)



**LOSS MITIGATION APPLICATION FORM (Page 2)**

I am requesting review of my current financial situation to determine whether I qualify for temporary or permanent mortgage loan relief options.

<input type="checkbox"/> My household income has been reduced. For example: unemployment, underemployment, reduced pay or hours, decline in business earnings, death, disability or divorce of a borrower or co-borrower.	<input type="checkbox"/> My monthly debt payments are excessive and I am overextended with my creditors. Debt includes credit cards, home equity or other debt.
<input type="checkbox"/> My expenses have increased. For example: monthly mortgage payment reset, high medical or health care costs, uninsured losses, increased utilities or property taxes.	<input type="checkbox"/> My cash reserves, including all liquid assets, are insufficient to maintain my current mortgage payment and cover basic living expenses at the same time.
<input type="checkbox"/> Death of a borrower or death of either the primary or secondary wage earner in the household	<input type="checkbox"/> Disaster (natural or man-made) adversely impacting the property or borrower's place of employment

Other

Additional information (please be as detailed as possible):

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**Borrower/Co-Borrower Acknowledgement and Agreement**

**In making this request for consideration, I certify under penalty of perjury:**

1. That all of the information in this document is truthful and the event(s) identified is/are the reason that I need to request assistance on my mortgage loan at this time.
2. I understand that the Servicer, or their agents may investigate the accuracy of my statements, may require me to provide supporting documentation. I also understand that knowingly submitting false information may result in foreclosure and may violate Federal or applicable law.
3. I understand that if I have intentionally defaulted on my existing mortgage, engaged in fraud or misrepresented any fact(s) in connection with this document, the servicer may cancel any agreement and may pursue foreclosure on my home.
4. I am willing to provide all requested documents and to respond to all servicer questions in a timely manner.
5. I understand that the servicer will use the information in this document to evaluate my eligibility for a loss mitigation solution, but the servicer is not obligated to offer me assistance based solely on the statements in this document.
6. I may be eligible for a demonstration period plan, repayment plan, or forbearance plan. If I am eligible for one of these plans, I agree that:
  - a. All the terms of this Acknowledgment and Agreement are incorporated into such plan by reference as if set forth in such plan in full.
  - b. My first timely payment under the plan will serve as acceptance of the terms set forth in the notice of the plan sent by the servicer
  - c. The servicer's acceptance of any payments under the plan will not be a waiver of any acceleration of my loan or foreclosure action that has occurred and will not cure my default unless such payments are sufficient to completely cure my entire default under my loan.
  - d. Payments due under a demonstration period plan for a loan modification, repayment plan or forbearance plan may or may not contain escrow amounts. If I was not previously required to pay escrow amounts, and my demonstration period plan, repayment plan or forbearance plan contains escrow amounts, I agree to the establishment of an escrow account and I agree that any prior waiver is revoked.
7. I understand the servicer will pull a current credit report on all borrowers obligated on the Note.
8. I understand that the servicer will collect and record personal information, including, but not limited to, my name, address, telephone number, social security number, credit score, income, payment history, and other information about account balances and activity. I understand and consent to the disclosure of my personal information and the terms of any agreement by servicer to any investor, insurer, guarantor, or servicer that owns, insures, guarantees or services my first lien or subordinate lien (if applicable) mortgage loan(s).
9. I consent to being contacted concerning this request for mortgage assistance at any telephone number, including mobile telephone number, or email address I have provided to the lender/servicer or authorized third party. This includes text messages and/or telephone calls to my cellular telephone.

**In Case of Errors or Request For Information:**

For any Notice Of Error or Requests For Information regarding your account, you must write to us at OneMain Executive Office of Customer Care, P.O. Box 1170, Evansville, IN 47706-1170. In your letter, give us the following information:

- Your name and account number.
- The dollar amount of any suspected error.
- Describe the error and explain, if you can, why you believe there is an error.

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

Co-Borrower Signature \_\_\_\_\_ Date \_\_\_\_\_

