

## PLEASE NOTE:

### Please return paperwork as follows:

The 3 documents that we need back *ASAP* are:

1. “Work Agreement”
2. “Authorization” (to speak with lender)
3. “Credit/Debit Authorization Form”, or certified funds.

**Your Lender(s) will always take 2-5 business days before they will recognize the authorization form and allow us to speak to them regarding your account. Time is critical, as you know.**

Please return all other documentation including “Client Summary”, “Income vs. Expenses”, and any other financials we’ve requested to us in a timely manner.

### **Paperwork can be sent to Home Relief Assistance in the following ways:**

- Via Fax to: Attention HRA: 1-800-650 2675 + name representative
- Via Email to: [info@homereliefassistance.com](mailto:info@homereliefassistance.com)
- Via any physical mail services to:  
**Home Relief Assistance  
14252 Culver Dr #A319  
Irvine, CA 92604**

Thank you for the confidence you have in Home Relief Assistance.

Do not hesitate to contact us if you have any questions.

HOME RELIEF ASSISTANCE , Irvine, California

### **Loan Modification Requirements:**

Borrower's Name: \_\_\_\_\_ Loan Number: \_\_\_\_\_

In order to start the process of your loan modification, you will need to provide us with all of the following information.

It is EXTREMELY important to submit a complete package because MISSING INFORMATION WILL DELAY THE PROCESSING OF YOUR REQUEST.

Please check off each item as you complete it and/or gather it for your package

Please rush this information to your Home Relief Assistance Specialist as quickly as possible. Please allow time for the processing of your paperwork.

Loan modification is carefully achieved through correspondence with your lender.

**BE ADVISED!** *It is your responsibility to furnish the information needed to successfully complete your loan modification package and obtain the best results!*

*Please attach this sheet with the front of your request package:*

**EXPLANATION OF FINANCIAL HARDSHIP** – This form allows you to explain in detail the reason(s) behind your financial situation. In addition to filling out this form, you will need to provide proof of your hardship claim such as medical bills, death certificate, unemployment stubs, divorce decree, etcetera. If there is more than one borrower, each person needs to complete a separate form.

**FINANCIAL WORKSHEET** – Information for both the borrower and co-borrower must be included and filled out completely.

**COPIES OF MOST RECENT PAYROLL STUBS** – Please provide copies of pay stubs for the month most recently worked. Payroll stubs are required for both the borrower and the co-borrower.

(if self-employed) **COPIES OF MOST RECENT FEDERAL INCOME TAX RETURN**

Provide copies of original signed and dated tax returns, including all schedules for the most recent tax year for both borrowers.

**COPIES OF YOUR MOST RECENT BANK STATEMENTS** – Please provide copies of the bank statements for all accounts; please provide ALL pages. If you need help obtaining your statements either on-line or by phone, please contact your representative for help.

**COPIES OF HOUSEHOLD BILLS** – Please provide copies of any and all household bills, utility bills (electric, gas, water, etcetera), insurance bills (car, home, health, etcetera), and any other outstanding liabilities which you pay.

HOME RELIEF ASSISTANCE , Irvine, California

**Financial Information Form**

PLEASE! It is your responsibility to furnish this information needed for work to begin and to successfully complete your modification with the best results!

Description	Borrower	Co-Borrower
Loan number (first & second):		
Name:		
Social Security Number:		
Contact info: home + work:		
Name employer:		
How long in current position:		

Property address: Street:	
City:	
Zip Code:	

Monthly income data	Borrower	Co-Borrower
Monthly take home pay		
Commission / Bonus		
Other income; specify (child support, alimony, rental income)		

ASSETS	Estimated value	Description	Monthly payment	Balance due	Description	Monthly payment	Balance due
Home		Mortgage			Child care		
Other real estate		2 <sup>nd</sup> mortgage			Cable		
Automobile		Real estate taxes			Medical expense		
Automobile		Other mortgage/rent			Medical life insurance		
Checking account		Alimony/child support			Student loan		
Savings account		Automobile loan			Credit card 1		
IRA Account		Gas, maintenance, parking			Credit card 2		
401K/ESOP acc		Insurance auto			Credit card 3		
Stock/bonds		Food			Dry cleaning		
Other investments		Utilities/telephone			Misc		

**EXPLANATION OF FINANCIAL HARDSHIP**

It is extremely important that your lender fully understands your current financial situation and the hardship you are experiencing.

Please complete this form by checking the appropriate reason or reasons for your hardship (a form is provided on the following page for more detailed explanation). If you have documentation that supports your explanation, please include it with this form when you return it to us.

**I am having trouble making my monthly payment due to financial difficulties.**

I believe my situation is:  Temporary  Permanent

**My financial difficulties are the result of (check all that apply:)**

➤ **Unemployment (Start Date \_\_\_\_\_, End Date \_\_\_\_\_)**

Explain \_\_\_\_\_  
\_\_\_\_\_

➤ **EXCESSIVE FINANCIAL RESPONSIBILITIES**

Explain \_\_\_\_\_  
\_\_\_\_\_

➤ **ILLNESS (Start Date \_\_\_\_\_, End Date \_\_\_\_\_)**

Explain: \_\_\_\_\_  
\_\_\_\_\_

➤ **Reduction In Income (Start Date \_\_\_\_\_, End Date \_\_\_\_\_)**

Explain \_\_\_\_\_  
\_\_\_\_\_

➤ **Death (Date Of Death \_\_\_\_\_)**

Explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

➤ **Other**

Explain \_\_\_\_\_  
\_\_\_\_\_





HOME RELIEF ASSISTANCE , Irvine, California

## **Authorization to Release Credit Information**

I authorize Home Relief Assistance to obtain a credit profile through a credit bureau.

The undersigned, jointly and severally, represent and warrant to the above mentioned companies that the information submitted in this personal financial statement, questionnaire and financial statement scheduled is true, correct and complete in all material respects.

The information and documentation provided does not omit any material fact or matter that makes the information or documentation presented misleading.

Borrower:

Co-borrower:

Name:

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Signature:

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Date:

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HOME RELIEF ASSISTANCE , Irvine, California

## **AUTHORIZATION FORM MITIGATION ASSISTANCE**

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

To: \_\_\_\_\_

Borrower's Name: \_\_\_\_\_

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

Social Security: \_\_\_\_\_

Loan #: \_\_\_\_\_

I \_\_\_\_\_ authorize Home Relief Assistance and its Agents the right to communicate with my Mortgage Lender concerning the hardship that will prevent me from continuing to make any more payments on my home loan.

I am requesting my Mortgage lender to allow Home Relief Assistance and its Agents to do whatever possible to avoid foreclosure due to the hardship I am experiencing.

Borrower:

Co-borrower

Name:

\_\_\_\_\_

\_\_\_\_\_

Signature:

\_\_\_\_\_

\_\_\_\_\_

Date:

\_\_\_\_\_

\_\_\_\_\_

HOME RELIEF ASSISTANCE , Irvine, California

## **WORK AGREEMENT FOR ASSISTANCE IN LOAN MODIFICATION**

DATE: \_\_\_\_\_

(CLIENT'S NAME) BORROWER \_\_\_\_\_  
CO-BORROWER \_\_\_\_\_

SUBJECT PROPERTY ADDRESS \_\_\_\_\_ (App#) \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

Let it be known:

The first party \_\_\_\_\_ and/or \_\_\_\_\_ does hereby

agree to enter into a Service for a fee with the Second Party Home Relief Assistance (further referred to as HRA)

**APPLICATION:** Client(s) represent that the information given to HRA relative to the mortgage delinquency and/or foreclosure situation is complete and accurate including, but not limited to, such facts as Mortgagee's name, mortgage account number as well as the terms and status of the mortgage indebtedness and arrearages. Client(s) has fully represented and disclosed the existence of any and all mortgages (deeds of trust, mortgages and promissory notes), liens, bankruptcies, or judgments against client(s) and/or said clients property, past or present, as well as, clients personal employment, household income, assets and expenditures and any pertinent information that may affect HRA's ability to perform services hereunder. Client(s) understand the importance of his/her/their full cooperation and full disclosure to prevent the loss of said property.

**2. CHARGES:** Client(s) shall pay to HRA an application fee of \$ \_\_\_\_\_, due on contract. When HRA obtains a favorable outcome for Client(s), an additional success fee of \$ \_\_\_\_\_ will be assessed. Client(s) agrees that if a payment plan is offered by HRA, surcharges may apply. Client(s) understands that client(s) will be responsible for any third party fees associated with their situation. This includes, but is not limited to appraisals, BPO reports and any new mortgage fees and costs.

**3. LIABILITY:** Monetary liability for damages shall be limited to the monies received by HRA for the services to be performed.

**4. AUTHORIZATION:** Client(s) hereby authorizes HRA and its authorized representatives to obtain a credit report and to furnish and/or release any and all information concerning Client(s) current and future financial condition to any agencies or individuals or their representatives connected to Client(s) mortgage to assist HRA, its employees and its representatives in representing Client(s) interests.

**5. COLLECTION:** Client(s) understand that once their account is transferred for collection, client(s) may be responsible for attorney's fees, collection fees, and court costs incurred during the collection process.

**6. LEGAL EXPENSES:** Client(s) understand that if client(s) bring suit against HRA and/or any of its employees and representatives, and judgment is found in favor of HRA its employees and/or representatives, the clients will be responsible for all legal costs and expenses associated with defending such suit. Client(s) further agrees that any litigation arising out of this Agreement involving HRA, its employees, and/or representatives shall be commenced and heard in the courts closest in proximity to Irvine, in the State of California. Whereby the Agreement shall be governed by, and construed according to, the laws of the Commonwealth of California.

**7. DOCUMENTS:** All work papers will be owned and retained by HRA and/or its representatives. Original documents furnished by the client(s) will be returned on request once case is officially finished and closed.

HOME RELIEF ASSISTANCE , Irvine, California

**8. GENERAL:** Client(s) hereby agrees to provide documentation, cooperation and/or aid to HRA and its representatives, as it deems reasonably necessary. If Client(s) fails or refuses to provide such documentation, cooperation and/or aid to HRA and its representatives, and HRA and its representatives deems it necessary to terminate said Agreement.

**9. SERVICES:** Client(s) understands that HRA undertakes only to perform services to attempt to alleviate the aforementioned problems and that HRA is a counseling office, and any and all advice given is not to be construed as legal advice. Should other services be recommended by HRA, it is the sole responsibility of the client(s) to pursue such services as well as to provide for any underlying or additional cost of doing so. Furthermore, Client(s) understand that HRA and its representatives are not a government agency and its employees are not government employees.

**10. LENDER:** Any and all decisions made by the lender(s) are to be considered final and the Client(s) fully understands that if the modification is accepted by client(s) that they are bound by the new terms and any failure to comply these new terms are solely the responsibility of the above said first party [redacted] (name borrower)

**11. NO WAIVER OF RIGHTS:** HRA's failure to exercise or enforce any right or provision of this Agreement will not constitute a waiver of such rights or provision.

**12. SEVERABILITY:** If any part of this Agreement is legally declared invalid or unenforceable, all other parts of this Agreement will remain valid and enforceable. Such invalidity or non-enforceability will not invalidate or render unenforceable any other part of this Agreement.

**13. TIME IS OF THE ESSENCE:** The parties agree that time is of the essence in the completion of the work called for under this Agreement. Client(s) agree to submit all requested documents in their entirety in a timely manner as requested by HRA. HRA agrees that all work shall be prosecuted regularly and diligently at such a rate of progress to ensure proper processing in a timely manner.

**13. AMENDMENT:** This Agreement shall not be altered, changed or amended except by instrument in writing executed by the parties hereto.

**ENTIRE AGREEMENT:** This Agreement contains the entire understanding between all parties hereto with respect to the subjects contained herein. No prior or contemporaneous oral or written communication shall alter or amend this Agreement. All subsequent changes must be in writing and signed by the Client(s) and HRA in order to be valid.

**ACKNOWLEDGMENT:** By signing below, Client(s) acknowledges paragraphs 1 through 13 and "Entire Agreement" statements have been read, understood and agreed to.

**IN WITNESS WHEREOF,** Client(s) has hereunto set their hand on the, [redacted] of [redacted]

Client signature: [redacted]

Print name: [redacted]

Client signature: [redacted]

Print name: [redacted]

HRA Representative: [redacted]

## LOAN MODIFICATION WORKSHEET

**Contact info:**

Borrower(s) name		Name HRA representative	
Contact phone + best time to call		Originator of lead	
Subject property address		Reference #	

**Current loan details (1<sup>st</sup> Trust deed)**

Mortgage company		Current balance	
Mortgage payment		Account #	
Current interest		Tax per month	
Delinquent amount		Recast rate	
NOD?		Last payment accepted	

**Second loan details (2<sup>nd</sup> Trust deed)**

Mortgage company		Current balance	
Mortgage payment		Account #	
Current interest		Tax per month	
Delinquent amount		Recast rate	
NOD?		Last payment accepted	

**Proposed modification:**

	1 <sup>st</sup> Trust Deed (primary loan)	2 <sup>nd</sup> Trust Deed (secondary loan)
Maximum affordable payment per customer's request:		
<b>Plus tax:</b>		
<b>Plus insurance:</b>		
<b>Total:</b>		
<b>Ideal term:</b>		
<b>Ideal rate:</b>		
Principal balance required to meet clients requested terms		
Less origination principal balance before request is made:		

I / we can manage a monthly payment of \$ \_\_\_\_\_ without a hardship. Any higher monthly payment than \$ \_\_\_\_\_ per month, and we will be either forced to sell or lose our home.

Home owner: \_\_\_\_\_

Co-borrower: \_\_\_\_\_

HOME RELIEF ASSISTANCE , Irvine, California

## Creditcard Authorization form:

### Home Relief Assistance

I/We, \_\_\_\_\_ authorize HRA to charge the credit or debit card provided below initially for the application fee of \$\_\_\_\_\_, and upon completion of the modification for the amount of \$\_\_\_\_\_ which is the total amount of \$\_\_\_\_\_.

We agree that subsequent fees owed to HRA may be charged to this account, only with Verbal authorization from the cardholder(s).

I understand that this fee is non-refundable.

1. Credit Card Debit Card (circle one)

2. Card Type: Visa Mastercard Discover (circle one)

3. Name(s) as this appears on card: \_\_\_\_\_

4. Billing address: \_\_\_\_\_ City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_

5. Card Number: \_\_\_\_\_

6. Expiration Date: \_\_\_\_\_

7. 3 digit security code on back of card: \_\_\_\_\_

Client's Printed Name: \_\_\_\_\_

Date \_\_\_\_\_ + Signature \_\_\_\_\_

Client's Printed Name: \_\_\_\_\_

Date \_\_\_\_\_ + Signature \_\_\_\_\_

**To immediately start the process, please complete this form and fax it back to: 800-650 2675 (toll free)**

**CHECK LIST (make sure all is completed and signed)**

- Loan modification requirements**
- Financial information form**
- Explanation of financial hardship**
- Hardship letter**
- Authorization for release credit information**
- Authorization form mitigation assistance**
- Work agreement for assistance in loan**
- Loan modification worksheet**
- Creditcard authorization form**

**Further info needed:**

- FULL CLIENT APPLICATION PACKET** – All questions answered and information filled out completely. Signed release agreements, hardship letters, and completed financial worksheet.
- PAYCHECK STUBS** (last 30 days)
- MORTGAGE COUPON** – Any and all correspondence from lender about late payments or foreclosure.
- HOMEOWNER'S INSURANCE INFORMATION**
- HOUSEHOLD BILLS** – Any and all health insurance, car insurance, cable, utility, Etc.
- LAST THREE MONTHS OF BANK STATEMENTS** – All pages.
- PAYMENT FOR SERVICES** – Cash, check, credit card, or money order.  
Acceptance fee + reservation for success fee