

TAHQAMENON AREA CREDIT UNION

"To us, it's always personal."

Mortgage Assistance Application

If you are having mortgage payment challenges, complete and submit this application to our Mortgage Department via:

mail: P.O. Box 485 Newberry, MI 49868

fax: (906) 293-3974

email: mortgages@tacumi.com.

We will contact you within five business days to acknowledge receipt and let you know if you need to send additional information or documents.

We will use the information you provide to help us identify the assistance you may be eligible to receive.

Borrower Information

Borrower's name: _____

Social Security Number (last 4 digits): _____

E-mail address: _____

Primary phone number: _____ Cell Home Work Other

Alternate phone number: _____ Cell Home Work Other

Co-borrower's name: _____

Social Security Number (last 4 digits): _____

E-mail address: _____

Primary phone number: _____ Cell Home Work Other

Alternate phone number: _____ Cell Home Work Other

Preferred contact method (choose all that apply): Cell phone Home phone Work phone Email Text—checking this box indicates your consent for text messaging

Is either borrower on active duty with the military (including the National Guard and Reserves)? Yes No

Property Information

Property Address: _____

Mailing address (if different from property address): _____

• The property is currently: A primary residence A second home An investment property

• The property is: Owner occupied Renter occupied Vacant

• I want to: Keep the property Sell the property Undecided

Hardship Information

The hardship causing mortgage payment challenges began on approximately (date) _____ and is believed to be:

- Short-term (up to 6 months)
- Long-term (greater than 6 months)
- Permanent

TYPE OF HARDSHIP	COMMENTS
<input type="checkbox"/> Unemployment	
<input type="checkbox"/> Reduction in income: a hardship that has caused a decrease in your income due to circumstances outside your control (e.g., elimination of overtime, reduction in regular working hours, a reduction in base pay)	
<input type="checkbox"/> Long-term or permanent disability, or serious illness of a borrower/co-borrower	
<input type="checkbox"/> Other (describe hardship not covered above: 	

Borrower Certification and Agreement

1. I certify and acknowledge that all of the information in this Mortgage Assistance Application is truthful, and the hardship I identified contributed to my need for mortgage relief.
2. I agree to provide the credit union all required documents, including any additional supporting documentation as requested, and will respond in a timely manner to all servicer or authorized third party* communications.
3. I acknowledge and agree that the credit union is not obligated to offer me assistance based solely on the representations in this document or other documentation submitted in connection with my request.
4. I consent to the credit union obtaining a current credit report for the borrower and co-borrower.
5. I agree that the terms of this borrower certification and agreement will apply to any modification plan, repayment plan, or forbearance plan that I may be offered based on this application. If I receive an offer for a modification plan or repayment plan, I agree that my first timely payment under the plan will serve as acceptance of the plan.
6. I consent to being contacted concerning this application for mortgage assistance at any telephone number, including mobile telephone number, or email address I have provided on this application.

Borrower signature: _____ Date: _____

Co-Borrower signature: _____ Date: _____