

TEG COVID-19 Hardship Certification



Please email mortgageservicing@tegfcu.com for any questions or assistance needed in completing the form.

Borrower Name ("I")¹ Printed: _____

Co-Borrower Name Printed: _____

Property Street Address: _____

Property City, State, Zip: _____

Loan #: _____

Please note only one borrower needs to submit this form.

In order to be considered for a 90-day forbearance or payment modification, I am submitting this form to the Lender/ Servicer and indicating by my checkmarks the one or more events that contribute to my difficulty in making payments on my mortgage loan due to COVID-19. I further acknowledge that I am aware that if my request includes deferring the tax and insurance portion of my payment an escrow shortage will occur, and that the escrow portion of my payment will increase to cover the shortage when my next escrow analysis is done if the shortage is not paid in full prior to analysis.

Borrower Co-Borrower

<input type="checkbox"/>	<input type="checkbox"/>	My income has been reduced or lost. For example: unemployment, underemployment, reduced job hours, reduced pay, or a decline in self-employed business earnings. I have provided details on the following page under "Explanation."
<input type="checkbox"/>	<input type="checkbox"/>	My household financial circumstances have changed. For example: death in family, serious or chronic illness, permanent or short-term disability, divorce or legal separation, increased family responsibilities (adoption or birth of a child, taking care of elderly relatives or other family members). I have provided details on the following page under "Explanation."
<input type="checkbox"/>	<input type="checkbox"/>	My expenses have increased. For example: monthly mortgage payment has increased or will increase, high medical and health-care costs, uninsured losses (such as those due to fires or natural disasters), unexpectedly high utility bills, increased real property taxes. I have provided details on the following page under "Explanation."
<input type="checkbox"/>	<input type="checkbox"/>	There are other reasons I/we cannot make our mortgage payments. I have provided details on the following page under "Explanation."

Explanation:

Please provide as much detail about your current situation, including:

- your current or most recent employer or source of income
- impact on current household income
- your current employment status (active, lessened hours or income, laid off with expectation to return to your previous employer, unemployed)
- any other detail regarding your current circumstances to support your request

TEG COVID 19 Hardship Certification

Borrower/Co-Borrower Certification, Acknowledgement, and Agreement

I certify, acknowledge, and agree:

1. All of the information in this Hardship Certification is truthful and the event(s) identified above has/have contributed to my need for mortgage assistance.
2. The Lender/Servicer may review the accuracy of my statements and may require me to provide supporting documentation. I am willing to provide all requested documents and respond to all Lender/Servicer communication in a timely manner. I understand that time is of the essence.
3. Knowingly submitting false information may violate applicable laws.
4. If I have intentionally defaulted on my existing mortgage, engaged in fraud or misrepresented any fact(s) in connection with this Hardship Certification, or if I do not provide all of the required documentation, the Lender/Servicer may not offer me a loss mitigation option and may pursue foreclosure on my home.
5. The Lender/Servicer may pull a current credit report on all borrowers obligated on the Note.
6. I am willing to commit to credit counseling if the Lender/Servicer so requires.
7. The Lender/Servicer will use this information to evaluate my eligibility for a loss mitigation option, but the Servicer is not obligated to offer me assistance based solely on the representations in this Hardship Certification.

Name

Joint Name

Email Address

Email Address

Cell Phone

Cell Phone

Home Phone

Home Phone

Work Phone

Work Phone

Date

Date

If completed through DocuSign the form will automatically be submitted. If you do not provide e-consent the form can be printed and mailed to:
Mortgage Servicing
TEG Federal Credit Union
1 Commerce Street
Poughkeepsie, NY 12603

Review of Borrower(s) Financial Information

Name:

Property Address:

Monthly Household Income

<u>Income Type</u>	<u>Amount</u>
Gross Wages	
Tips/Commission/Bonus/Overtime Income	
Self-Employment Income	
Rental Income	
Taxable Income from Social Security, Annuities or Retirement Plan	
Child Support/ Alimony (This income is not required to be provided if Borrower chooses not have it considered.)	
Other Income: _____	
Total Monthly Income	

Monthly Household Expenses and Debts

<u>Expense Type</u>	<u>Amount</u>
First Mortgage PITIA	
Second Mortgage PITIA, if applicable	
Installment Loans/ Credit Card Payments (total minimum payment per month)	
Child Support/ Alimony Payments (This liability is not required to be provided if Borrower chooses not to have it considered.)	
Car Lease Payments	
Mortgage PITIA for Other Properties Owned	
Other Expenses/ Debts: _____	
Total Monthly Household Expenses and Debts	

Household Assets

<u>Asset Type</u>	<u>Amount</u>
Checking Account(s)	
Savings/Money Market Account	
CD(s)/ Certificate of Deposit	
Stocks/Bonds	
Other Cash on Hand	
Estimated Value of Subject Property	
Estimated Value of Other Real Estate Owned	
Other Assets: _____	
Total Assets	

