

Home Retention Assistance Program Hardship Affidavit

FIRST FINANCIAL

C R E D I T ♦ U N I O N

Primary Borrower Name: _____
Co-Borrower Name: _____
Property Street Address: _____
Property City, State, Zip: _____
Loan Number: _____

In order to qualify for consideration for First Financial Credit Union's ("First Financial") Home Retention Assistance Program (the "Agreement"), I/we am/are submitting this form to First Financial and indicating by my/our check marks ("✓") the one or more events that contribute to my/our difficulty making payments on my/our mortgage loan.

- | 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 below 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, increased family responsibilities (adoption or birth of a child, taking care of elderly relatives or other family members). I have provided details below 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 below under "Explanation." |
| <input type="checkbox"/> | <input type="checkbox"/> | My cash reserves are insufficient to maintain the payment on my mortgage loan and cover basic living expenses at the same time. Cash reserves include assets such as cash, savings, money market funds, marketable stocks or bonds (excluding retirement accounts). Cash reserves do not include assets that serve as an emergency fund (generally equal to three times my monthly debt payments). I have provided details below under "Explanation." |
| <input type="checkbox"/> | <input type="checkbox"/> | My monthly debt payments are excessive, and I am overextended with my creditors. I may have used credit cards, home equity loans or other credit to make my monthly mortgage payments. I have provided details below under "Explanation." |
| <input type="checkbox"/> | <input type="checkbox"/> | There are other reasons I/we cannot make my/our mortgage payments. I have provided details below under "Explanation." |

Primary Borrower/Co-Borrower Acknowledgement

1. Under penalty of perjury, I/we certify that all of the information in this affidavit is truthful and the event(s) identified above has/have contributed to my/our need to modify the terms of my/our mortgage loan.
2. I/we understand and acknowledge First Financial may investigate the accuracy of my/our statements, may require me/us to provide supporting documentation, and that knowingly submitting false information may violate Federal Law.



3. I/we understand First Financial will pull a current credit report on all borrowers obligated on the Note.
4. I/we understand that if I/we have intentionally defaulted on my/our existing mortgage, engaged in fraud or misrepresented any fact(s) in connection with this Hardship Affidavit, or if I/we do not provide all of the required documentation, First Financial may cancel the Agreement and may pursue foreclosure on my/our home.
5. I/we certify that my/our property is owner-occupied and I/we have not received a condemnation notice.
6. I/we certify that I/we am/are willing to commit to credit counseling if it is determined that my/our financial hardship is related to excessive debt.
7. I/we certify that I/we am/are willing to provide all requested documents and to respond to all First Financial communication in a timely manner. I/we understand that time is of the essence.
8. I/we understand that First Financial will use this information to evaluate my/our eligibility for a loan modification or other workout, but First Financial is not obligated to offer me/us assistance based solely on the representations in this affidavit.

 Primary Borrower Signature Date

Email Address: _____

Cell Phone: _____

Home Phone: _____

Work Phone: _____

Best Time and/or Day to Call: _____

 Co-Borrower Signature Date

Email Address: _____

Cell Phone: _____

Home Phone: _____

Work Phone: _____

Best Time and/or Day to Call: _____

Explanation: _____

(Please continue writing on a separate page if needed.)