

Dear Homeowner,

There are possible options available for borrowers who are unable to afford payments and wish to avoid foreclosure. In order to review a loss mitigation packet is necessary for BIFI Loan Servicing to fully evaluate your situation; therefore, it is important that we receive at a minimum the following information:

- Completion of Financial Analysis Form enclosed.
- Executed Hardship Letter
- Copy of 2 most recent Bank Statements (full copies including blank pages by banking institution)
- Copy of 2 most recent Pay-Stubs
- 12 months Profit and Loss statements, if self-employed
- Previous Year's Tax Return or last 2 years' W-2 forms
- Completed and signed IRS Form 4506T
- Award letter stating your Social Security, disability, or pension earnings
- Copy of recent utility bill(s) (i.e. electric, gas, water etc.)

Additionally, the United States Department of Housing and Urban Development (HUD) sponsors free housing counseling services. Visit the following website **https://apps.hud.gov/offices/hsg/sfh/hcc/fc/** to find a HUD-Approved housing counselor in your area or call (800) 569-4287

# Beware of Scams!

Unfortunately, homeowners looking for mortgage help can be victimized by scam artists. Foreclosure rescue and mortgage modification scams are a growing problem that could cost you thousands of dollars.

- Beware of anyone who asks you to pay a fee in exchange for counseling services or the modification of a delinquent loan.
- Beware of people who pressure you to sign papers immediately or who try to convince you that they can "save" your home if you sign or transfer over the deed to your house.
- Do not sign over the deed to your property to any organization or individual unless you are working directly with your mortgage company to forgive your debt.
- Never make a mortgage payment to anyone other than your mortgage company without their approval.
- If you believe you have been the victim of a scam, you should file a complaint with the Federal Trade Commission (FTC).

Visit the FTC's online Complaint Assistant or call 877-FTC-HELP (877-382-4357) for assistance in English or Spanish.

Sincerely,

BIFI Loan Servicing LLC

#### 490 Schooleys Mountain Road. Suite 7, Hackettstown, NJ 07840

This communication is from a debt collector but does not imply that BIFI Loan Services, LLC is attempting to collect money from anyone whose debt has been discharged pursuant to (or who is under the protection of) the bankruptcy laws of the United States; in such instances, it is intended solely for informational purposes and does not constitute a demand for payment. Company NMLS #: 2106411



# P: 888-217-7652 F: 973-671-4113 E: customerservice@bifils.com

# **FINANCIAL ANALYSIS FORM**

	Homeowner	Co-Ho	meowner	
Name:				
Home Telephone:				
Cell Phone:				
Email Address:				
Best Time to Communicat	e:			
QUESTIONNAIRE				
The property is currently:	[] Owner Occupied	[] Second Home	[] Rental Property	[] Vacant
Requested Assistance:	[] Loan Modification	[] Short Sale/Deed-In-	Lieu [] Forbearand	ce [] Other
Property Taxes: Please provide tax b	[] Current [] Pain [] bill is available including delingu	d by Mortgage Company ent years	[ ] Delinquent [ ] Un	known
Property Insurance: Please provide most	[] Current [] Paid by t up to date insurance policy	Mortgage Company [ ] U	ninsured [ ] Force Place	d Insurance
The property is in a Home	owner Association:	Yes No		
If yes: A	re the HOA dues current?	Yes No		
	/hen are the HOA due and ar	nount?		
Please provide mos	t up to date HOA Statement			
INCOME				
Monthly Gross Income:				
Employment:				
Self-Employment:				
Rental Income:				
Unemployment:				
Child Support Alimony:				
Disability/Social Security:				
Public Assistance: Other:				
Total Monthly Income				

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## **HOUSEHOLD EXPENSES**

First Mortgage:		Property Taxes:	
		Homeowner's Insurance:	
Other Mortgage:			
AUTO EXPENSES			
Fuel:			
UTILIES			
Water:	Phone:	Gas:	
Electric:	Cable:	Cell Phone:	
Sewer:			
MISC EXPENSES			
Groceries:		HOUSEHOLD ASSETS	
Spending Money:			
Child Support:			
Alimony:		Savings Account Balance:	
Medical:		Stocks/Bonds:	
Child Care:		Investments (401k, IRA, etc.):	
Credit Cards:		Other Equities:	
Pet Care:		Cash on Hand:	
Personal Loan(s):		Other:	
Charitable Contributions:			
Life Insurance:		—	
1. What has caused th	e financial hardship?		
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2. When did the hardship occur and is it still on going?

Borrower Signature:\_\_\_\_\_

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

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