



Main Office NMLS# 5985  
Branch Office NMLS# 9785  
Scott Nielsen NMLS# 191008  
Jeff Harrison NMLS# 1314656  
www.snsc.com

## Loss Mitigation Packet

### NOTICE OF ATTEMPT TO COLLECT DEBT

YOU ARE HEREBY NOTIFIED THAT SN SERVICING CORPORATION, ITS EMPLOYEES, AGENTS AND ATTORNEYS ARE ATTEMPTING TO COLLECT THIS DEBT. ANY INFORMATION THAT WE OBTAIN WILL BE USED FOR THAT PURPOSE. IF YOU HAVE PREVIOUSLY RECEIVED A DISCHARGE IN BANKRUPTCY AND THIS DEBT WAS NOT REAFFIRMED, THIS CORRESPONDENCE IS NOT AND SHOULD NOT BE CONSTRUED TO BE AN ATTEMPT TO COLLECT SUCH A DEBT AS YOUR PERSONAL LIABILITY, BUT IS INSTEAD A STEP IN THE ENFORCEMENT OF A MORTGAGE LIEN AGAINST YOUR PROPERTY.

Para información en español llame al (800) 603-0836 ext 2643 o 2660 o 2750

Dear Borrower,

Your loan is currently being serviced by SN Servicing Corporation ("SNSC").

You are receiving this loss mitigation packet in response to your request for mortgage assistance. The assistance options available to you depend on your individual circumstances. If you provide all required information and documentation about your situation, we will determine if you qualify for temporary or long-term relief, including solutions that may allow you to stay in your home (i.e., repayment plan, forbearance, or loan modification). These options are subject to application and approval.

If you have questions about this application or the options available to you, please call us at:

**(800) 603-0836**

SN Servicing Corporation Asset Managers are  
available **Monday – Friday (6am to 6:30pm PST)**

Time is of the essence; we ask that you promptly submit the required documents, as requests are processed in the order in which they are received.

This letter will not delay or affect the foreclosure that may be pending for your loan. Any demand or notice is still in effect and this will not be stopped unless you are able to qualify for one of these programs. If you want to avoid foreclosure you must call the number listed above. Otherwise, the foreclosure will proceed pursuant to state law and the loan documents.

**The United States Department of Housing and Urban Development (HUD) sponsors free housing counseling services. To find a HUD-Approved housing counselor in your area, call (800) 569-4287 or TDD (800) 877-8339, or go online at [www.hud.gov](http://www.hud.gov).**

**PLEASE BE CERTAIN TO COMPLETE BOTH SIDES OF THESE FORMS.**



**Loss Mitigation Checklist**

**To process your request for Loss Mitigation, your return package to SN Servicing Corporation must include ALL of the following:**

- Signed and completed **Request for Mortgage Assistance** (form enclosed).
- Signed and completed **Hardship Affidavit** (form enclosed).
- Completed **Financial Analysis Worksheet** (form enclosed).
- Copies of the **last two months pay stubs for all borrowers**. If you are unemployed, please include unemployment reward letter. If you receive a pension: disability; alimony and/or child support, please include official documentation of same. If you have rental income, please include a copy of the rental agreement(s).
- If you are self-employed, please send (1) a copy of the most recent **Federal Tax Return** for your business; (2) past six month's profit and loss statements; and (3) the past six month's business bank account statements...please include ALL pages.
- Copy of current **Homeowner's Insurance policy** or an estimate for coverage if you do not currently have homeowner's insurance. Please use a company you would want to purchase coverage from for the quote.
- Copy of most recent **Property Tax Bill**.

**Contact Us**

If you have any questions regarding the items listed above, or if you would prefer to submit the documents via fax, please contact us at the number below:

**(800) 603-0836**

**Hours of Operation**  
**Monday – Friday (8:00am to 5:00pm PST)**

**Send in Your Packet**

Upon completion, please return all requested items to the address listed below. Requests will be processed in the order in which they are received, so we recommend that you start the process as soon as possible.

**SN Servicing Corporation**  
**323 Fifth Street**  
**Eureka, CA 95501**



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## Request for Mortgage Assistance

**\*\*COMPLETE ALL PAGES\*\***

Borrower	Co-Borrower
Borrower's Name	Co-Borrower's Name
Mailing Address	Mailing Address, if different from Borrower's

<b>Mortgage Loan Number</b>	
<b>Property Address</b>	
<b>The Property is</b>	Owner Occupied: <input type="checkbox"/> Renter Occupied: <input type="checkbox"/> Vacant: <input type="checkbox"/>
<b>The Property is my</b>	Primary Residence: <input type="checkbox"/> Second Home: <input type="checkbox"/> Investment: <input type="checkbox"/>
<b>I want to (check all that apply)</b>	Keep the Property: <input type="checkbox"/> Sell the Property: <input type="checkbox"/> Vacate: <input type="checkbox"/>
<b>Have you contacted a Housing Counselor for help?</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>If yes, please provide the following contact information:</b>	Agency Name: _____
	Counselor's Name: _____
	Counselor's Phone #: _____
	Counselor's Email: _____
<b>Who pays the Real Estate Tax Bill on your Property?</b>	I pay bill: <input type="checkbox"/> Lender pays: <input type="checkbox"/> Condo/HOA pays: <input type="checkbox"/>
<b>Are the Taxes current?</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Do you have Condo or HOA fees?</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>



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<b>If yes, specify Amount and HOA Name</b>	Amount:	Paid to:	
<b>Who pays the Hazard Insurance Premium on your Property?</b>	I pay bill: <input type="checkbox"/>	Lender pays: <input type="checkbox"/>	Condo/HOA pays: <input type="checkbox"/>
<b>Is the Policy current?</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
<b>Name of Insurance Company:</b>			
<b>Insurance Company Phone #:</b>			
<b>Have you filed for Bankruptcy?</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
<b>If yes, what Chapter</b>	Chapter 7 <input type="checkbox"/>	Chapter 12 <input type="checkbox"/>	
	Chapter 11 <input type="checkbox"/>	Chapter 13 <input type="checkbox"/>	
<b>Bankruptcy Filing Date:</b>			
<b>Bankruptcy Case Number:</b>			
<b>Has your Bankruptcy been Discharged?</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
<b>Is the Property listed for Sale?</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
<b>For Sale by Owner?</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
<b>Have you received an Offer on the Property?</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
<b>If yes, please provide the following:</b>	Date of Offer: _____		
	Amount of Offer:	\$ _____	
	Agent's Name:	_____	
	Agent's Phone Number:	_____	

**Please list any Additional Liens, Mortgages, HELOCs on this Property**

Lien Holder/Service's Name	Loan Number	Contact Number

# Affidavit of Financial Hardship

Borrower Name: \_\_\_\_\_ Loan Number: \_\_\_\_\_

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

In order to qualify for **SN Servicing Corporations** (“Servicer”) offer to enter into an agreement to modify my loan, I/we am/are submitting this form to the Servicer and indicating by my/our checkmarks (“✓”) 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 our mortgage payments. I have provided details below under “Explanation.”  |

## **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 the Servicer 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 the Servicer 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, the Servicer 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 Servicer communication in a timely manner. I/we understand that time is of the essence.
- 8. I/we understand that the Servicer will use this information to evaluate my/our eligibility for a loan modification or other workout, but the Servicer is not obligated to offer me/us assistance based solely on the representations in this affidavit.

<b>Borrower Signature</b>	<b>Date</b>
E-mail Address: _____	
Cell Phone _____	
Home Phone _____	
Work Phone _____	

<b>Co-Borrower Signature</b>	<b>Date</b>
E-mail Address: _____	
Cell Phone _____	
Home Phone _____	
Work Phone _____	

<b>Explanation:</b>

## FINANCIAL ANALYSIS WORKSHEET

BORROWER		CO-BORROWER	
Employer Name		Employer Name	
Employer Phone #		Employer Phone #	
Years on Job		#Years on Job	
BORROWER MONTHLY INCOME		CO-BORROWER MONTHLY INCOME	
Gross Wages per Month:	\$	Gross Wages per Month:	\$
Unemployment Compensation:	\$	Unemployment Compensation:	\$
Child Support/Alimony*:	\$	Child Support/Alimony*:	\$
Disability/SSI:	\$	Disability/SSI:	\$
Rental Income:	\$	Rental Income:	\$
Pension/Annuity Income:	\$	Pension/Annuity Income:	\$
Tips, Commission, Bonus, Overtime:	\$	Tips, Commission, Bonus, Overtime:	\$
Foods Stamps/Public Assistance*:	\$	Foods Stamps/Public Assistance*:	\$
Non-Borrower Contribution:	\$	Non-Borrower Contribution:	\$
Other:	\$	Other:	\$
Federal & State Tax Withholdings	-\$	Federal & State Tax Withholdings	-\$
Other Deductions (401k etc)	-\$	Other Deductions (401k etc)	-\$

COMBINED HOUSEHOLD ASSETS (BORROWER AND CO-BORROWER)			
Checking Accounts (Total amount, if more than one)	\$		
401(K), IRA, or Pension Fund	\$		
Savings/Money Market	\$		
Certificates of Deposits (CDs)	\$		
Stocks/Bonds/Mutual Funds	\$		
Cash on Hand	\$		
Value of all Real Estate except Principal Residence	\$		
Settlement	\$		
Other	\$		
COMBINED MONTHLY EXPENSES (BORROWER AND CO-BORROWER)			
1 <sup>st</sup> Mortgage (Principal & Interest)	-\$	Auto Loans/Lease	-\$
Other Mortgage (Principal & Interest)	-\$	Fuel, Maintenance/Repairs	-\$
Other Mortgage (Principal & Interest)	-\$	Auto Insurance/Registration	-\$
Homeowners Insurance	-\$	Other Transportation Expenses	-\$
Property Taxes	-\$	Credit Cards Minimum Payment	-\$
HOA/Condo Fees	-\$	Personal Loan Minimum Payment	-\$
Electricity	-\$	Child Support/Alimony Expense	-\$
Gas	-\$	Child Care	-\$
Water and Sewer	-\$	Health Insurance	-\$
Waste/Trash Removal	-\$	Medical/Dental/Vision Insurance	-\$
Telephone/Cell Phone	-\$	Food/Groceries	-\$
Internet Service	-\$	Dining Out	-\$
Cable/Satellite	-\$	Personal & Household Items	-\$
Negative Net Rental Income	-\$	Other Debt/Miscellaneous	-\$

**\*Note:** You are not required to disclose Public Assistance, Child Support, Alimony or Separation Maintenance, unless you choose to have it considered by your servicer.

## **Legal Rights and Protections Under the SCRA**

Servicemembers on “active duty” or “active service,” or a spouse or dependent of such a servicemember may be entitled to certain legal protections and debt relief pursuant to the Servicemembers Civil Relief Act (50 USC §§ 39014043) (SCRA).

### **Who May Be Entitled to Legal Protections Under the SCRA?**

- Regular members of the U.S. Armed Forces (Army, Navy, Air Force Marine Corps and Coast Guard).
- Reserve and National Guard personnel who have been activated and are on Federal active duty
- National Guard personnel under a call or order to active duty for more than 30 consecutive days under section 502(f) of title 32, United States Code, for purposes of responding to a national emergency declared by the President and supported by Federal funds
- Active service members of the commissioned corps of the Public Health Service and the National Oceanic and Atmospheric Administration.
- Certain United States citizens serving with the armed forces of a nation with which the United States is allied in the prosecution of a war or military action.

### **What Legal Protections Are Servicemembers Entitled To Under the SCRA?**

- The SCRA states that a debt incurred by a servicemember, or servicemember and spouse jointly, prior to entering military service shall not bear interest at a rate above 6 % during the period of military service and one year thereafter, in the case of an obligation or liability consisting of a mortgage, trust deed, or other security in the nature of a mortgage, or during the period of military service in the case of any other obligation or liability.
- The SCRA states that in a legal action to enforce a debt against real estate that is filed during, or within one year after the servicemember’s military service, a court may stop the proceedings for a period of time, or adjust the debt. In addition, the sale, foreclosure, or seizure of real estate shall not be valid if it occurs during or within one year after the servicemember’s military service unless the creditor has obtained a valid court order approving the sale, foreclosure, or seizure of the real estate.
- The SCRA contains many other protections besides those applicable to home loans.

### **How Does A Servicemember or Dependent Request Relief Under the SCRA?**

- In order to request relief under the SCRA from loans with interest rates above 6% a servicemember or spouse must provide a written request to the lender, together with a copy of the servicemember’s military orders. [Note: Lender should place its name, address, and contact information here.]
- There is no requirement under the SCRA, however, for a servicemember to provide a written notice or a copy of a servicemember’s military orders to the lender in connection with a foreclosure or other debt enforcement action against real estate. Under these circumstances, lenders should inquire about the military status of a person by searching the Department of Defense’s Defense Manpower Data Center’s website, contacting the servicemember, and examining their files for indicia of military service. Although there is no requirement for servicemembers to alert the lender of their military status in these situations, it still is a good idea for the servicemember to do so.

### **How Does a Servicemember or Dependent Obtain Information About the SCRA?**

- Servicemembers and dependents with questions about the SCRA should contact their unit’s Judge Advocate, or their installation’s Legal Assistance Officer. A military legal assistance office locator for all branches of the Armed Forces is available at <https://legalassistance.law.af.mil/>
- “Military OneSource” is the U. S. Department of Defense’s information resource. If you are listed as entitled to legal protections under the SCRA (see above), please go to [www.militaryonesource.mil/legal](http://www.militaryonesource.mil/legal) or call (800) 342-9647 (toll free from the United States) to find out more information. Dialing instructions for areas outside the United States are provided on the website.