

14<sup>th</sup> November, 2013

RECEIVED

NOV 21 2013

SUPERIOR COURT  
CLERK'S OFFICE

From,  
Vargés George,  
8 Golden Pond Dr.,  
East Brunswick, NJ-08850.

To,  
Superior Court Clerk's Office, Foreclosure Processing Services,  
Attention: Objection to Notice of Intention to Foreclose,  
P.O.Box - 971,  
Trenton, New Jersey 08625.

**Sub: Objection to Foreclosure**  
Passaic County, Docket No.F-030403-13  
**Docket Number in Foreclosure action : F-416-06**  
Loan Number with Chase : 6635973

Dear Sir / Madam,

I received the letter from Chase of their intent to foreclose my house.

The Company that I worked for filed for bankruptcy and I lost my job. Not only that I lost my monthly revenue, I lost all my savings until then also.

Since I was unable to make the mortgage payment, I put my house on sale and listed with the real estate. The Real Estate Company tried their best but couldn't sell the house due to the slump in the real estate market as well as the slow down of the economy.

Since I was not able to pay the mortgage after I lost the job, I was in regular touch with the lender. I thought I could sell the house and pay off the debt.

Since it didn't work out, Chase suggested the Loan Modification. They took all my details including financials over the phone and told me that I qualify for the Loan Modification and mailed me the package. When I sent them the filled up application package they replied that I am not qualified.

After few weeks Chase called again and told me again over the phone that I am qualified and mailed me the application.

This process is going on for the last few years. (Attaching herewith the latest Loan Modification Package)

I am trying for a full time job but since the entire job market is very slow, still hadn't received a full time job. But I am working as a consultant of a Bible School.

My wife is making about \$ 11,000/- per month now my part time job as the Consultant brings \$5,000/- with a total of about \$ 16,000/- per month.

I am a Management Consultant and will get a full time job soon.

I was requesting Chase for the last few years to give me an option for monthly payment so that I can stay in my house. I have wife and two daughters who are going to College in New Jersey.

If I am right, I have paid back more than \$500,000/- already.

I am an ordained Minister also and a well sought after teacher and trainer of Christian leaders. My teaching itinerary used to be full but didn't take up any assignment for few years as I was kind of down after lost everything I saved for more than 15 years. Now I started accepting teaching and preaching assignments, which a lot of churches and organizations were waiting for. This will also bring substantial honorarium in the future.

It is quite strange that I received three different letters in one week from three different people from Chase saying that they will be my Dedicated Customer Service Specialist. It looked really strange. I brought it to their attention and received another letter from another person stating that person will be my new dedicated representative and promised that there won't be any confusion in the future. Once day after this, I received another letter from a different person as my dedicated representative. I am attaching herewith the copies also.

I am really confused at the way Chase is dealing with me.

I asked many times about what Chase is expecting from me to give me an option for a monthly payment so that I can plan accordingly. I was replied that they can't tell me that.

This is my only residence and I love to keep it. I told Chase many times that I am ready to make the monthly payment because I love to keep my house. If they had allowed me to make the monthly payment since the last few years, the interest accumulated would have been much lower now.

Meanwhile I received a check as part of the proceeds from the settlement between the Federal Govt and Chase regarding the foreclosure practices of Chase. (Attaching herewith the copy of that check.)

I am trying my best to get back to normal. I wish Chase can give me an option for a monthly payment which will allow me to stay in my house.

If you need more information, please don't hesitate to contact me.

Telephone : 732-960-1352

My Mobile : 646-771-8104

Email : [vargesg@gmail.com](mailto:vargesg@gmail.com)

Sincerely,



Varges George.

Cc: Plaintiff's Attorney at Morgan, Lewis & Bockius LLP, Princeton, NJ.

THIS DOCUMENT CONTAINS ANTI-THEFT DEVICES INCLUDING MICRO-PRINTING AND A COLORED BACKGROUND. ABSENCE OF THESE FEATURES INDICATE A COPY.

Fund 1 Independent Foreclosure Review Payment QSF  
Loan Servicer: JPMorgan Chase  
P.O. Box 8056  
Faribault, MN 55021-9456

The Huntington National Bank

56-1512  
441

Check No. 3689228

DATE	CLAIM NUMBER	AMOUNT
April 26, 2013	1607412111	\$300.00

Financial Institutions may call  
1-855-460-1528 to verify this check.

VOID AFTER NINETY (90) DAYS  
NOT VALID FOR AMOUNT OTHER THAN \$300.00  
All Payee's signatures required on back in order for this instrument to be paid.

Pay: THREE HUNDRED DOLLARS AND NO CENTS  
Pay to the order of: VARGES GEORGE

*Paul V. [Signature]*  
Authorized Signature

⑈ 3689228 ⑆ ⑆ 044115126 ⑆ 01893001312 ⑆

Chase (FL5-5110)  
P.O. Box 44120  
Jacksonville, FL 32231-4120

RECEIVED

NOV 21 2013

SUPERIOR COURT  
CLERK'S OFFICE



November 7, 2013

CERTIFIED MAIL: Return Receipt Requested and First Class Mail

VARGES GEORGE  
8 GOLDEN POND DRIVE  
EAST BRUNSWICK, NJ 08850

Re: Order to Show Cause: In re Application by JPMorgan Chase Bank, N.A., to Issue Corrected Notices of Intent to Foreclose on Behalf of Identified Foreclosure Plaintiffs in Certain Uncontested Cases (Superior Court of New Jersey, Chancery Division, Passaic County, Docket No.: F-030403-13)

Borrower Name: VARGES GEORGE  
Loan Number: 0006635973  
Plaintiff Name in Foreclosure action: JPMORGAN CHASE BANK, AS TRUSTEE FOR  
CERTIFICATEHOLDERS OF BEAR STERNS ASSET BACKED  
SECURITIES, INC. ASSET BACKED CERTIFIATES, SERIES, 2003-2  
Docket Number in Foreclosure action: F-416-06

Dear VARGES GEORGE:

Please be advised that the New Jersey Supreme Court recently held in *U.S. Bank N.A. v. Guillaume*, 209 N.J. 449 (2012), that mortgage lenders seeking to foreclose must comply with the New Jersey Fair Foreclosure Act's requirement that a Notice of Intention to Foreclose set forth the name and address of the lender.

**Why You Are Receiving This Letter**

You are receiving this letter because you are the defendant in a pending foreclosure action, and it is believed that the Notice of Intention to Foreclose served upon you prior to the commencement of the foreclosure action did not comply with the requirements of the Fair Foreclosure Act and/or JPMorgan Chase Bank, N.A. ("Chase"), the servicer of your loan, may lack sufficient information to adequately confirm mailing of the original Notice of Intention to Foreclose.

By the court's Order to Show Cause dated September 23, 2013, and in compliance with the Supreme Court's opinion in *U.S. Bank N.A. v. Guillaume*, Hon. Margaret Mary McVeigh, P.J.Ch., Passaic Vicinage, gave permission to Chase to serve, along with the Order to Show Cause, corrected Notices of Intention to Foreclose on all defendant mortgagors/parties obligated on the debt in pending foreclosure actions filed before February 28, 2012.

The docket number for your foreclosure action may be found in the subject line of this letter.

**Information About the Order to Show Cause and Verified Complaint**

Enclosed with this letter is a copy of the Order to Show Cause and a copy of the verified complaint filed with the Order to Show Cause. The verified complaint lists the following lenders in the following counts of the verified complaint:



Mail Code: OH4-7356  
3415 Vision Drive  
Columbus, OH 43219-6009

Phone: 1-800-848-9380

Additional contact information is provided in the corrected Notice of Intention to Foreclose.

### **How to File an Objection**

You have the right to object to the enclosed Order to Show Cause (the process by which the court gave the plaintiff permission to serve the corrected Notice of Intention to Foreclose). To do so, you must file a written objection under the docket number for the Order to Show Cause.

You also have the right to object to the enclosed corrected Notice of Intention to Foreclose. To do so, you must file a written objection under the docket number for the foreclosure action in your individual case. The docket number for your foreclosure action may be found in the subject line of this letter.

For either type of objection, you must set forth with specificity the basis of the objection, and file the objection with the Superior Court Clerk's Office on or before December 20, 2013 at the following address:

Superior Court Clerk's Office, Foreclosure Processing Services  
Attention: Objection to Notice of Intention to Foreclose  
P.O. Box 971  
Trenton, New Jersey 08625

You must also serve a copy of the objection on the plaintiff's attorney at Morgan, Lewis & Bockius LLP, 502 Carnegie Center, Princeton, NJ 08540-6241 (Attention: JPMorgan Chase Order to Show Cause), and mail a copy of the objection to Judge McVeigh at:

The Superior Court of New Jersey, Passaic County Courthouse  
71 Hamilton Street  
Chambers 100  
Paterson, NJ 07505

Your personal appearance at the Superior Court Clerk's Office or your local courthouse will not qualify as an objection. A telephone call will not protect your rights; you must file your objection and serve it on the plaintiff's attorney if you want the court to hear your objection to the relief the plaintiff is seeking. If you file a specific written objection, the case will be sent to a Judge for resolution. You will be informed by the Judge of the time and place of the hearing on your objection.

### **Questions about Filing an Objection**

Should you have questions related to the procedure for filing an objection, please visit the New Jersey Courts On-Line Self-Help Center at <http://www.judiciary.state.nj.us/prose/index.htm>. You may also contact the Superior Court Clerk's Office at 1-609-421-6100, or at [SCCOForeclosure.Mailbox@judiciary.state.nj.us](mailto:SCCOForeclosure.Mailbox@judiciary.state.nj.us).

If you are represented by an attorney in your foreclosure case, you should notify him or her that you received these papers. These papers are not being sent directly to your attorney if you have one.

If you cannot afford an attorney, you may apply for free legal assistance online at

Chase  
P.O. Box 469030  
Glendale, CO 80246-9030



October 31, 2013

03947-01 IF1A 305-000000000000  
Varges George  
8 Golden Pond Drive  
East Brunswick, NJ 08850



**Your new dedicated Customer Assistance Specialist**

Account: \*\*\*5973  
Property Address: 8 Golden Pond Drive  
East Brunswick, NJ 08850-0000

Dear Varges George:

I am writing to let you know that I will serve as your new dedicated Customer Assistance Specialist. I will be on point to help with whatever you need as we work on finding the best option for your mortgage.

Please do not hesitate to call me any time you have questions or concerns. I am here to make things as easy as possible for you and clear up any confusion you may have. In addition, I will be in touch with you from time to time to provide updates and remind you about important deadlines.

Here is my contact information:

- **Direct toll-free telephone number:** 877-496-3138 ext. 3826483
- **TDD Text number:** (800) 582-0542
- **Mail:** Chase Fulfillment Center  
PO Box 469030  
Glendale, CO 80246-9030
- **Fax to send us any documents:** (866) 282-5682

**An important note:** If you are not fully satisfied with any aspect of the service you receive from us, please let me know right away. If I am not able to address your concerns, I will put you directly in touch with a supervisor on our team.

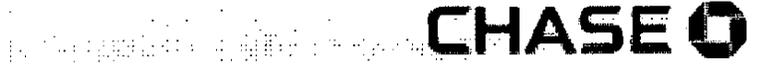
I look forward to working with you. In the meantime, please let me know if you have any questions.

Sincerely,

KIMBERLY DESTIN  
Customer Assistance Specialist  
Chase  
8774963138 ext. 3826483  
800-582-0542 TTY  
www.chase.com

LM988

Chase  
P.O. Box 469030  
Glendale, CO 80246-9030



November 01, 2013

03060-01 IF1A 306-000000000000  
Varges George  
8 Golden Pond Drive  
East Brunswick, NJ 08850



**Your new dedicated Customer Assistance Specialist**

Account: \*\*\*5973  
Property Address: 8 Golden Pond Drive  
East Brunswick, NJ 08850-0000

Dear Varges George:

I am writing to let you know that I will serve as your new dedicated Customer Assistance Specialist. I will be on point to help with whatever you need as we work on finding the best option for your mortgage.

Please do not hesitate to call me any time you have questions or concerns. I am here to make things as easy as possible for you and clear up any confusion you may have. In addition, I will be in touch with you from time to time to provide updates and remind you about important deadlines.

Here is my contact information:

- **Direct toll-free telephone number:** 877-496-3138 ext. 3826469
- **TDD Text number:** (800) 582-0542
- **Mail:** Chase Fulfillment Center  
PO Box 469030  
Glendale, CO 80246-9030
- **Fax to send us any documents:** (866) 282-5682

**An important note:** If you are not fully satisfied with any aspect of the service you receive from us, please let me know right away. If I am not able to address your concerns, I will put you directly in touch with a supervisor on our team.

I look forward to working with you. In the meantime, please let me know if you have any questions.

Sincerely,

JEAN PIMENTEL  
Customer Assistance Specialist  
Chase  
8774963138 ext. 3826469  
800-582-0542 TTY  
[www.chase.com](http://www.chase.com)

LM988

Chase  
P.O. Box 469030  
Glendale, CO 80246-9030



October 24, 2013

01136-01 IF1A 298-000000000000  
Varges George  
8 Golden Pond Drive  
East Brunswick, NJ 08850



**Your new dedicated Customer Assistance Specialist**

Account: \*\*\*5973  
Property Address: 8 Golden Pond Drive  
East Brunswick, NJ 08850-0000

Dear Varges George:

I am writing to let you know that I will serve as your new dedicated Customer Assistance Specialist. I will be on point to help with whatever you need as we work on finding the best option for your mortgage.

Please do not hesitate to call me any time you have questions or concerns. I am here to make things as easy as possible for you and clear up any confusion you may have. In addition, I will be in touch with you from time to time to provide updates and remind you about important deadlines.

Here is my contact information:

- **Direct toll-free telephone number:** 877-496-3138 ext. 3825782
- **TDD Text number:** (800) 582-0542
- **Mail:** Chase Fulfillment Center  
PO Box 469030  
Glendale, CO 80246-9030
- **Fax to send us any documents:** (866) 282-5682

**An important note:** If you are not fully satisfied with any aspect of the service you receive from us, please let me know right away. If I am not able to address your concerns, I will put you directly in touch with a supervisor on our team.

I look forward to working with you. In the meantime, please let me know if you have any questions.

Sincerely,

JESSE COLMENERO  
Customer Assistance Specialist  
Chase  
8774963138 ext. 3825782  
800-582-0542 TTY  
www.chase.com

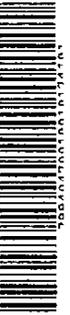
LM988

Chase  
P.O. Box 469030  
Glendale, CO 80246-9030



October 25, 2013

01741-01 IF1A 299-000000000000  
Varges George  
8 Golden Pond Drive  
East Brunswick, NJ 08850



**Your new dedicated Customer Assistance Specialist**

Account: \*\*\*5973  
Property Address: 8 Golden Pond Drive  
East Brunswick, NJ 08850-0000

Dear Varges George:

I am writing to let you know that I will serve as your new dedicated Customer Assistance Specialist. I will be on point to help with whatever you need as we work on finding the best option for your mortgage.

Please do not hesitate to call me any time you have questions or concerns. I am here to make things as easy as possible for you and clear up any confusion you may have. In addition, I will be in touch with you from time to time to provide updates and remind you about important deadlines.

Here is my contact information:

- **Direct toll-free telephone number:** 877-496-3138 ext. 3826469
- **TDD Text number:** (800) 582-0542
- **Mail:** Chase Fulfillment Center  
PO Box 469030  
Glendale, CO 80246-9030
- **Fax to send us any documents:** (866) 282-5682

**An important note:** If you are not fully satisfied with any aspect of the service you receive from us, please let me know right away. If I am not able to address your concerns, I will put you directly in touch with a supervisor on our team.

I look forward to working with you. In the meantime, please let me know if you have any questions.

Sincerely,

JEAN PIMENTEL  
Customer Assistance Specialist  
Chase  
8774963138 ext. 3826469  
800-582-0542 TTY  
www.chase.com

LM988

Chase  
P.O. Box 469030  
Glendale, CO 80246-9030



October 28, 2013

00422-01 IF1A 302-000000000000  
Varges George  
8 Golden Pond Drive  
East Brunswick, NJ 08850



**Your new dedicated Customer Assistance Specialist**

Account: \*\*\*5973  
Property Address: 8 Golden Pond Drive  
East Brunswick, NJ 08850-0000

Dear Varges George:

I am writing to let you know that I will serve as your new dedicated Customer Assistance Specialist. I will be on point to help with whatever you need as we work on finding the best option for your mortgage.

Please do not hesitate to call me any time you have questions or concerns. I am here to make things as easy as possible for you and clear up any confusion you may have. In addition, I will be in touch with you from time to time to provide updates and remind you about important deadlines.

Here is my contact information:

- **Direct toll-free telephone number:** 877-496-3138 ext. 3825483
- **TDD Text number:** (800) 582-0542
- **Mail:** Chase Fulfillment Center  
PO Box 469030  
Glendale, CO 80246-9030
- **Fax to send us any documents:** (866) 282-5682

**An important note:** If you are not fully satisfied with any aspect of the service you receive from us, please let me know right away. If I am not able to address your concerns, I will put you directly in touch with a supervisor on our team.

I look forward to working with you. In the meantime, please let me know if you have any questions.

Sincerely,

MELISSA GRIFFITH  
Customer Assistance Specialist  
Chase  
8774963138 ext. 3825483  
800-582-0542 TTY  
www.chase.com

LM988



**Return all required forms and documents immediately!**  
Loan number: 6635973

NOVEMBER 08, 2013

VARGES GEORGE  
8 GOLDEN POND DRIVE  
EAST BRUNSWICK, NEW JERSEY 08850

Dear VARGES GEORGE:

Your mortgage payment is now 30 days or more past due and your mortgage loan is in default, but assistance is available. The sooner you respond, the more quickly we can determine if you are eligible for a program to help make your mortgage payments more affordable or avoid foreclosure.

We need you to send us important financial information so we can determine if you qualify for solutions that may allow you to stay in your home (such as refinance, repayment, forbearance or a loan modification) or other options to avoid foreclosure (such as selling your home for less than you owe or releasing your property).

Here are the next steps you need to take to request mortgage assistance:

**STEP 1 COMPLETE THE ENCLOSED FORMS**

The Request for Mortgage Assistance Form (RMA) and IRS Form 4506T-EZ.

**STEP 2 COLLECT AND SEND US COPIES OF YOUR FINANCIAL DOCUMENTS**

We will verify your income using documents that include your most recent pay stubs; Profit & Loss statement with company name and date (if you're self-employed or an independent contractor); and proof of Social Security or disability payments, if applicable. Send **all** statement pages, even if they're blank.

**We're ready to help you find a more affordable mortgage loan solution!** Call your Customer Assistance Specialist or 1-866-550-5705 if you have questions about your options or about the forms and documents we need. Once we have all the necessary forms and documents to review your application, we will contact you within 30 days regarding your eligibility. While we review your modification application, please continue to make your current monthly mortgage payment by your usual due date.

If you qualify for a modification, no foreclosure sale will take place pending your timely first trial period payment. However, if you don't meet the terms of the Trial Period Plan and do not make other arrangements with us, we'll enforce the original terms and conditions of your mortgage loan, which may include foreclosure.

If your property is scheduled for a foreclosure sale, contact us immediately. If you send us the forms and financial documents less than 15 calendar days before a scheduled foreclosure sale, there is no guarantee we can stop the foreclosure, so it is important that you call us right away.

You can also call the U.S. Department of the Treasury's **HOPE Hotline Number at 1-888-995-HOPE** (1-888-995-4673) and ask for "**MHA Help**" to get free assistance. Free homeownership counseling is available through nonprofit organizations experienced in homeownership counseling and approved by the U.S. Department of Housing and Urban Development (HUD). Call HUD toll-free at 1-800-569-4287 or visit [makinghomeaffordable.gov](http://makinghomeaffordable.gov) for a listing of these organizations.

**Don't wait!** Send in your forms and documents immediately or you may not be eligible to participate in a mortgage assistance program.

Sincerely,  
JEAN PIMENTEL  
Customer Assistance Specialist  
Direct Phone: 877-496-3138 ext 3826469  
Chase  
866-550-5705  
800-582-0542 TTY  
www.chase.com

<p><b>Your dedicated Customer Assistance Specialist is:</b> JEAN PIMENTEL Direct phone number: 877-496-3138 ext 3826469</p>
---

**We are a debt collector.**

**If you are represented by an attorney, please refer this letter to your attorney and provide us with the attorney's name, address, and telephone number**

This is not an attempt to collect a debt or to impose personal liability for any obligation, including, without limitation, any obligation that was discharged, or is subject to an automatic stay in bankruptcy under Title 11 of the United States Code.



©2013 JPMorgan Chase & Co. JPMorgan Chase Bank, N.A.

# REQUEST FOR MORTGAGE ASSISTANCE FORM



Important! To avoid delays, please make sure all pages are complete and accurate.

6635973  
Loan Number

Section A BORROWER	CO-BORROWER
Borrower's Name: <b>VARGES GEORGE</b>	Co-Borrower's Name:
Social Security Number: <b>108-70-2118</b> Date of Birth: <b>05-26-56</b>	Social Security Number: _____      Date of Birth: _____
Home phone number with area code: <b>732-960-1352</b>	Home phone number with area code: _____
Cell or work number with area code: <b>646-771-8104</b>	Cell or work number with area code: _____
Email Address: <b>vargesg@gmail.com</b>	Email Address: _____
Is any borrower a servicemember? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Have you recently been deployed away from your principal residence or recently received a Permanent Change of Station (PCS) order? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, I intend to occupy this property as my primary residence some time in the future. <input type="checkbox"/> Yes <input type="checkbox"/> No Is any borrower the surviving spouse of a deceased servicemember who was on active duty at the time of death? <input type="checkbox"/> Yes <input type="checkbox"/> No	
I want to: <input checked="" type="checkbox"/> Keep the Property <input type="checkbox"/> Sell the Property <input type="checkbox"/> Release the Property to avoid foreclosure (Deed in Lieu) The property is my: <input checked="" type="checkbox"/> Primary Residence <input type="checkbox"/> Second Home <input type="checkbox"/> Investment The property is: <input checked="" type="checkbox"/> Owner Occupied <input type="checkbox"/> Renter Occupied <input type="checkbox"/> Vacant	
Have you previously requested mortgage payment assistance through Chase? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No How many single family properties other than your principal residence do you and/or any co-borrower(s) own individually, jointly, or with others? <u>  0  </u> Have you ever had a Home Affordable Modification Program (HAMP) trial period plan or permanent modification on your principal residence? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Have you or any co-borrower had a permanent HAMP modification on any other property you own? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No    If "Yes", how many? _____ Are you or any co-borrower currently in or being considered for a HAMP trial period plan on a property other than your principal residence? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Complete this section ONLY if you are requesting mortgage assistance in connection with property that is not your principal residence. Is the mortgage on your principal residence paid? <input type="checkbox"/> Yes <input type="checkbox"/> No    If "No", number of months your payment is past due (if known): _____	
Number of People in Household: <u>  4  </u>	
Mailing address: <b>8 GOLDEN POND DRIVE, EAST BRUNSWICK, NEW JERSEY 08850</b> Property address (if same as mailing address, just write "same"): <b>8 GOLDEN POND DRIVE, EAST BRUNSWICK, NEW JERSEY 08850</b>	
Is the property listed for sale? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, what was the listing date? _____ Have you received an offer on the property? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date of Offer: _____      Amount of Offer: _____ Closing Date: _____ Agent's Name: _____ Agent's Phone Number: _____ For Sale by Owner? <input type="checkbox"/> Yes <input type="checkbox"/> No	Have you contacted a credit counseling agency for help? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, please complete the following: Counselor's Name: _____ Agency Name: _____ Counselor's Phone Number: _____ Counselor's Email: _____
Who pays the real estate tax bill on your property? <input type="checkbox"/> I do <input checked="" type="checkbox"/> Lender does <input type="checkbox"/> Paid by condo or HOA Are the taxes current? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Condominium or HOA Fees? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No    \$ <u>  0  </u> per month Are the fees paid current? <input type="checkbox"/> Yes <input type="checkbox"/> No Name and address that fees are paid to: _____	Who pays the hazard insurance premium for your property? <input type="checkbox"/> I do <input checked="" type="checkbox"/> Lender does <input type="checkbox"/> Paid by condo or HOA Is the policy current? <input type="checkbox"/> Yes <input type="checkbox"/> No Name of Insurance Co.: <b>AMERICAN SEC INSURANCE CO</b> Insurance Co. Phone Number: <b>770-763-1000</b>



# REQUEST FOR MORTGAGE ASSISTANCE FORM



**Important!** To avoid delays, please make sure all pages are complete and accurate.

6635973  
Loan Number

## Section B

## REQUIRED DOCUMENTATION/HARDSHIP AFFIDAVIT

Describe your hardship:

LOST MY JOB

Separate Hardship letter attached

Date situation began is:

2006

I believe that my situation is:

- Short-term (under 6 months)
- Medium-term (6-12 months)
- Long-term or permanent (greater than 12 months)

**I am having difficulty making my monthly payment because of reasons set forth below.**

(Please check all that apply and submit required documentation demonstrating your hardship. If your mortgage loan is insured or guaranteed by the Federal Housing Administration (FHA), Veteran's Administration (VA) or Rural Housing Service (RHS), hardship documentation is not required but you must submit all financial documentation that supports your request for assistance.)

<input checked="" type="checkbox"/> Unemployment	<ul style="list-style-type: none"> <li>• A copy of your benefits statement or letter detailing the amount, frequency and duration of your unemployment benefits</li> </ul>
<input type="checkbox"/> Underemployment	<ul style="list-style-type: none"> <li>• No hardship documentation required, as long as you have submitted the income documentation that supports the income</li> </ul>
<input type="checkbox"/> Income reduction (e.g., elimination of overtime, reduction in regular working hours, or a reduction in base pay)	<ul style="list-style-type: none"> <li>• No hardship documentation required, as long as you have submitted the income documentation that supports the income</li> </ul>
<input type="checkbox"/> Divorce or legal separation; separation of borrowers unrelated by marriage, civil union or similar domestic partnership under applicable law	<ul style="list-style-type: none"> <li>• Divorce decree signed by the court OR</li> <li>• Separation agreement signed by the court OR</li> <li>• Current credit report evidencing divorce, separation, or non-occupying Borrower has a different address OR</li> <li>• Recorded quitclaim deed evidencing that the non-occupying borrower or co-borrower has relinquished all rights to the property</li> </ul>
<input type="checkbox"/> Death of a borrower or death of either the primary or secondary wage earner in the household or dependent family member	<ul style="list-style-type: none"> <li>• Death certificate OR</li> <li>• Obituary or newspaper article reporting the death</li> </ul>
<input type="checkbox"/> Long-term or permanent disability; serious illness of a borrower/ co-borrower or dependent family member	<ul style="list-style-type: none"> <li>• Signed letter from a doctor certifying that you are under their care. Do not provide medical records or any details of your illness or disability OR</li> <li>• Written statement or other documentation verifying disability or illness OR</li> <li>• Proof of monthly insurance benefits or government assistance (if applicable)</li> </ul>
<input type="checkbox"/> Disaster (natural or man-made) adversely impacting the property or borrower's place of employment	<ul style="list-style-type: none"> <li>• Insurance claim OR</li> <li>• Federal Emergency Management Agency grant or Small Business Administration loan OR</li> <li>• Borrower or employer property located in a federally declared disaster area</li> </ul>
<input type="checkbox"/> Distant employment transfer	<ul style="list-style-type: none"> <li>• Proof of transfer OR</li> <li>• Military Permanent Change of Station (PCS)</li> </ul>
<input type="checkbox"/> Excessive obligations	<ul style="list-style-type: none"> <li>• No hardship documentation required, as long as you have submitted the income documentation that supports the income</li> </ul>
<input type="checkbox"/> Business failure	<ul style="list-style-type: none"> <li>• Tax return from the previous year (including all schedules) AND</li> <li>• Proof of business failure supported by one of the following:                             <ul style="list-style-type: none"> <li>• Bankruptcy filing for the business; or</li> <li>• Two months recent bank statements for the business account evidencing cessation of business activity; or</li> <li>• Most recent signed and dated quarterly or year-to-date profit and loss statement</li> </ul> </li> </ul>
<input type="checkbox"/> Payment increase	<ul style="list-style-type: none"> <li>• No hardship documentation required, as long as you have submitted the income documentation that supports the income</li> </ul>
<input type="checkbox"/> Other _____	

**If you have income from rental properties that are not your principal residence, you must provide a copy of the current lease agreement with bank statements showing deposit of rent checks.**



**REQUEST FOR MORTGAGE ASSISTANCE FORM**



**Important!** To avoid delays, please make sure all pages are complete and accurate.

6635973  
Loan Number

**Section C ADDITIONAL LIENS/MORTGAGES OR JUDGMENTS**  
Complete if applicable.

Check this box if this section does not apply to you.

Lien Holder's Name/Service	Balance	Phone Number	Reference Number/Loan Number

A lien is a legal claim on property to secure a loan or debt until paid off. It is put in place by contract or court order.

**Section D BANKRUPTCY**  
Complete if applicable.

Check this box if this section does not apply to you.

Have you filed for bankruptcy?  Yes  No If yes:  Chapter 7  Chapter 13 Filing Date: \_\_\_\_\_  
 Has your bankruptcy been discharged?  Yes  No Bankruptcy case number: \_\_\_\_\_

**Section E INCOME/EXPENSES FOR HOUSEHOLD**

**EMPLOYMENT INFORMATION**

Borrower Monthly Income: \$ <u>5000.00</u>	Co-Borrower Monthly Income: \$ _____
Employer 1 Name: _____	Employer 1 Name: _____
Employer 1 Address: _____	Employer 1 Address: _____
Employment Start Date: <u>06-01-2013</u>	Employment Start Date: _____
Employer 2 Name: _____	Employer 2 Name: _____
Employer 2 Address: _____	Employer 2 Address: _____
Employment Start Date: _____	Employment Start Date: _____
Are you self-employed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Are you self-employed? <input type="checkbox"/> Yes <input type="checkbox"/> No

**OTHER INCOME/EXPENSES**

Is there a person not on the mortgage note who lives in the residence and contributes financially to the household?  Yes  No

If yes, complete the following:

First and Last Name: MARY VARGHESE DDS

Monthly amount contributed to the household (not including the amount contributed to the Mortgage): \$ \_\_\_\_\_

Monthly amount contributed to the Mortgage: \$ 11,645.39

Are there living expenses for this person?  Yes  No

If yes, monthly amount of expenses \_\_\_\_\_



# REQUEST FOR MORTGAGE ASSISTANCE FORM



Important! To avoid delays, please make sure all pages are complete and accurate.

6635973  
Loan Number

HOUSEHOLD INCOME	
Monthly Gross Wages	\$
Monthly Self-Employment Income	\$5000
Monthly Overtime	\$
Monthly Unemployment Income	\$
Monthly Tips, Commissions, Bonus	\$
Monthly Non-Taxable Social Security/SSDI	\$
Monthly Taxable Social Security Benefits or Other Monthly Income from Annuities or Retirement Plans	\$
Monthly Child Support/Alimony <sup>2</sup>	\$
Monthly Gross Rents Received <sup>3</sup>	\$
Monthly Food Stamps/Welfare	\$
Monthly Other 1099	\$11645
<b>Total Monthly Income</b>	<b>\$16645</b>

HOUSEHOLD EXPENSES/DEBT	
Monthly First Mortgage Principal and Interest Payment <sup>1</sup>	\$
Monthly Second Mortgage Principal and Interest Payment <sup>1</sup>	\$
Monthly Homeowners' Insurance <sup>1</sup>	\$
Monthly Property Taxes <sup>1</sup>	\$
Monthly HOA/Condo Fees/Property Maintenance <sup>1</sup>	\$
Monthly Mortgage Payments on Other Properties <sup>4</sup>	\$
Monthly Credit Cards/Installment Loan(s) (Total Minimum Payment)	\$2700
Monthly Child Support/Alimony Payments	\$
Monthly Auto Lease/Payment	\$900
Monthly Other	\$
<b>Total Monthly Expenses/Debt</b>	<b>\$3600</b>

HOUSEHOLD ASSETS associated with the property and/or borrower(s) excluding retirement funds	
Checking Account(s)	\$9400
Checking Account(s)	\$
Savings/Money Market	\$
CDs	\$
Stocks/Bonds	\$76000
Other Cash on Hand	\$2500
Other Real Estate (estimated value)	\$
Other	\$
<b>Total Assets</b>	<b>\$87900</b>

<sup>1</sup> The amount of the monthly payment made to your lender - including, if applicable, monthly principal, interest, real property taxes and insurance premiums.

<sup>2</sup> Notice: Alimony, child support, or separate maintenance income need not be revealed if you do not choose to have it considered for repaying this loan.

<sup>3</sup> Include rental income received from all properties you own EXCEPT a property for which you are seeking mortgage assistance in Section H.

<sup>4</sup> Include mortgage payments on all properties you own EXCEPT your principal residence and the property for which you are seeking mortgage assistance in Section H.

## Section F

## DODD-FRANK CERTIFICATION

The following information is requested by the federal government in accordance with the Dodd-Frank Wall Street Reform and Consumer Protection Act (Pub. L. 111-203). You are required to furnish this information. The law provides that no person shall be eligible to begin receiving assistance from the Making Home Affordable Program, authorized under the Emergency Economic Stabilization Act of 2008 (12 U.S.C. 5201 et seq.), or any other mortgage assistance program authorized or funded by that Act, if such person, in connection with a mortgage or real estate transaction, has been convicted, within the last 10 years, of any one of the following: (A) felony larceny, theft, fraud, or forgery, (B) money laundering or (C) tax evasion.

I/we certify under penalty of perjury that I/we have not been convicted within the last 10 years of any one of the following in connection with a mortgage or real estate transaction:

- (a) felony larceny, theft, fraud, or forgery,
- (b) money laundering or
- (c) tax evasion.

I/we understand that the servicer, the U.S. Department of the Treasury, or their agents may investigate the accuracy of my statements by performing routine background checks, including automated searches of federal, state and county databases, to confirm that I/we have not been convicted of such crimes. I/we also understand that knowingly submitting false information may violate federal law.

If you have been convicted of one of the mortgage or real estate crimes listed above within the last 10 years, you must cross out this section. You will be considered for other mortgage assistance options that are not a part of the Making Home Affordable Program.

This certification is effective on the earlier of the date listed below or the date received by your servicer.



**REQUEST FOR MORTGAGE ASSISTANCE FORM**



Important! To avoid delays, please make sure all pages are complete and accurate.

6635973  
Loan Number

**Section G**

**OTHER PROPERTIES OWNED**

Check this box if this section does not apply to you.

For the amount of the monthly payment, include, if applicable, monthly principal, interest, real property taxes and insurance premiums. You must provide information about all properties that you or the co-borrower own, other than your principal residence and any property described below. Use additional sheets if necessary.

**PROPERTY #1**

Property Address: \_\_\_\_\_ Loan I.D. Number: \_\_\_\_\_  
First Mortgage Servicer Name: \_\_\_\_\_ Mortgage Balance \$ \_\_\_\_\_ Current Value \$ \_\_\_\_\_  
Second Mortgage Servicer Name: \_\_\_\_\_ Mortgage Balance \$ \_\_\_\_\_ Current Value \$ \_\_\_\_\_  
Property is:  Vacant  Second or Seasonal Home  Rented  
Gross Monthly Rent \$ \_\_\_\_\_ Monthly Mortgage Payment \$ \_\_\_\_\_

**PROPERTY #2**

Property Address: \_\_\_\_\_ Loan I.D. Number: \_\_\_\_\_  
First Mortgage Servicer Name: \_\_\_\_\_ Mortgage Balance \$ \_\_\_\_\_ Current Value \$ \_\_\_\_\_  
Second Mortgage Servicer Name: \_\_\_\_\_ Mortgage Balance \$ \_\_\_\_\_ Current Value \$ \_\_\_\_\_  
Property is:  Vacant  Second or Seasonal Home  Rented  
Gross Monthly Rent \$ \_\_\_\_\_ Monthly Mortgage Payment \$ \_\_\_\_\_

**PROPERTY #3**

Property Address: \_\_\_\_\_ Loan I.D. Number: \_\_\_\_\_  
First Mortgage Servicer Name: \_\_\_\_\_ Mortgage Balance \$ \_\_\_\_\_ Current Value \$ \_\_\_\_\_  
Second Mortgage Servicer Name: \_\_\_\_\_ Mortgage Balance \$ \_\_\_\_\_ Current Value \$ \_\_\_\_\_  
Property is:  Vacant  Second or Seasonal Home  Rented  
Gross Monthly Rent \$ \_\_\_\_\_ Monthly Mortgage Payment \$ \_\_\_\_\_

**PROPERTY #4**

Property Address: \_\_\_\_\_ Loan I.D. Number: \_\_\_\_\_  
First Mortgage Servicer Name: \_\_\_\_\_ Mortgage Balance \$ \_\_\_\_\_ Current Value \$ \_\_\_\_\_  
Second Mortgage Servicer Name: \_\_\_\_\_ Mortgage Balance \$ \_\_\_\_\_ Current Value \$ \_\_\_\_\_  
Property is:  Vacant  Second or Seasonal Home  Rented  
Gross Monthly Rent \$ \_\_\_\_\_ Monthly Mortgage Payment \$ \_\_\_\_\_

**PROPERTY #5**

Property Address: \_\_\_\_\_ Loan I.D. Number: \_\_\_\_\_  
First Mortgage Servicer Name: \_\_\_\_\_ Mortgage Balance \$ \_\_\_\_\_ Current Value \$ \_\_\_\_\_  
Second Mortgage Servicer Name: \_\_\_\_\_ Mortgage Balance \$ \_\_\_\_\_ Current Value \$ \_\_\_\_\_  
Property is:  Vacant  Second or Seasonal Home  Rented  
Gross Monthly Rent \$ \_\_\_\_\_ Monthly Mortgage Payment \$ \_\_\_\_\_



REQUEST FOR MORTGAGE ASSISTANCE FORM



Important! To avoid delays, please make sure all pages are complete and accurate.

6635973
Loan Number

Section H

OTHER PROPERTY FOR WHICH ASSISTANCE IS REQUESTED

Complete this section ONLY if you are requesting mortgage assistance with a property that is not your principal residence.

Check this box if this section does not apply to you.

I am requesting mortgage assistance with a rental property. Yes No
I am requesting mortgage assistance with second or seasonal home. Yes No
I am requesting mortgage assistance for a home that is no longer my primary residence due to an out of area job transfer or foreign service assignment. I intend to occupy this property as my primary residence sometime in the future. Yes No
If "Yes" to any of these statements, I want to: Keep the property Sell the property Release the Property to avoid foreclosure (Deed in Lieu)

Property Address: Loan I.D. Number:
Do you have a second mortgage on the property? Yes No If "Yes", Servicer Name: Loan I.D. Number:
Do you have condominium or homeowners association (HOA) fees? Yes No If "Yes", Monthly Fee \$ Are HOA fees paid current? Yes No
Name and address that fees are paid to:

Does your mortgage payment include taxes and insurance? Yes No If "No", are the taxes and insurance paid current? Yes No
Annual Homeowners' Insurance \$ Annual Property Taxes \$

If requesting assistance with a rental property, property is currently:
Vacant and available for rent.
Occupied without rent by your legal dependent, parent or grandparent as their principal residence.
Occupied by a tenant as their principal residence.
Other

If rental property is occupied by tenant: Term of lease/occupancy MM/DD/YYYY - MM/DD/YYYY Gross Monthly Rent \$

If rental property is vacant, describe efforts to rent property:

If applicable, describe relationship of and duration of non-rent paying occupant of rental property:

Is the property for sale? Yes No If "Yes", Listing Agent's Name: Phone Number:
List Date? Have you received a purchase offer? Yes No Amount of Offer? Closing Date:

RENTAL PROPERTY CERTIFICATION

You must complete this certification if you are requesting a mortgage modification with respect to a rental property.

Check this box if this section does not apply to you.

- 1. I intend to rent the property to a tenant or tenants for at least five years following the effective date of my mortgage modification. I understand that the servicer, the U.S. Department of the Treasury, or their respective agents may ask me to provide evidence of my intention to rent the property during such time. I further understand that such evidence must show that I used reasonable efforts to rent the property to a tenant or tenants on a year-round basis, if the property is or becomes vacant during such a five-year period.
Note: The term "reasonable efforts" includes, without limitation, advertising the property for rent in local newspapers, websites or other commonly used forms of written or electronic media, and/or engaging a real estate or other professional to assist in renting the property, in either case, at or below market rent.
2. The property is not my secondary residence and I do not intend to use the property as a secondary residence for at least five years following the effective date of my mortgage modification. I understand that if I do use the property as a secondary residence during such five-year period, my use of the property may be considered to be inconsistent with the certifications I have made herein.
Note: The term "secondary residence" includes, without limitation, a second home, vacation home or other type of residence that I personally use or occupy on a part-time, seasonal or other basis.
3. I do not own more than five (5) single-family homes (i.e., one-to-four unit properties) (exclusive of my principal residence).
Notwithstanding the foregoing conditions, I may at any time sell the property, occupy it as my personal residence, or permit my legal dependent, parent or grandparent to occupy it as their principal residence with no rent charged or collected, none of which will be considered to be inconsistent with the certifications made herein.
This certification is effective on the earlier of the dates listed below or the date the RMA is received by your servicer.

By checking this box and initialing below, I am requesting a mortgage modification under MHA with respect to the rental property described in this section and I hereby certify under penalty of perjury that each of the statements above are true and correct with respect to that property.

Initials: Borrower Co-Borrower



# REQUEST FOR MORTGAGE ASSISTANCE FORM



Important! To avoid delays, please make sure all pages are complete and accurate.

6635973  
Loan Number

## Section 1

### INFORMATION FOR GOVERNMENT MONITORING PURPOSES

The following information is requested by the federal government in order to monitor compliance with federal statutes that prohibit discrimination in housing. You are not required to furnish this information, but are encouraged to do so. The law provides that a lender or servicer may not discriminate either on the basis of this information, or on whether you choose to furnish it. If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation. If you do not furnish ethnicity, race, or sex, the lender or servicer is required to note the information on the basis of visual observation or surname if you have made this request for a loan modification in person. If you do not wish to furnish the information, please check the box below.

<b>Borrower:</b> <input type="checkbox"/> I do not wish to furnish this information	<b>Co-Borrower:</b> <input type="checkbox"/> I do not wish to furnish this information
<b>Ethnicity:</b> <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	<b>Ethnicity:</b> <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino
<b>Race:</b> <input type="checkbox"/> American Indian or Alaska Native <input checked="" type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White	<b>Race:</b> <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White
<b>Sex:</b> <input type="checkbox"/> Female <input checked="" type="checkbox"/> Male	<b>Sex:</b> <input type="checkbox"/> Female <input type="checkbox"/> Male

### HOMEOWNERS HOTLINE

If you have questions about this document or the modification process, please call your Servicer. If you have questions about the program that your Servicer cannot answer or need further counseling, you can call the Homeowner's HOPE™ Hotline at 888-995-HOPE (4673). The Hotline can help answer questions about the program and offers free HUD-certified counseling services in English and Spanish.



### NOTICE TO BORROWERS

Be advised that by signing this document you understand that any documents and information you submit to your Servicer in connection with the Making Home Affordable Program are under penalty of perjury. Any misstatement of material fact made in the completion of these documents including but not limited to misstatement regarding the occupancy in your home, hardship circumstances, and/or income, expenses, or assets will subject you to potential criminal investigation and prosecution for the following crimes: perjury, false statements, mail fraud, and wire fraud. The information contained in these documents is subject to examination and verification. Any potential misrepresentation will be referred to the appropriate law enforcement authority for investigation and prosecution. By signing this document, you certify, represent and agree that: "Under penalty of perjury, all documents and information I have provided to Lender in connection with the Making Home Affordable Program, including the documents and information regarding my eligibility for the program, are true and correct."

If you are aware of fraud, waste, abuse, mismanagement or misrepresentation affiliated with the Troubled Asset Relief Program, please contact the SIGTARP Hotline by calling 1-877-SIG-2009 (toll-free), 202-622-4559 (fax), or [www.sig tarp.gov](http://www.sig tarp.gov). Mail can be sent to Hotline Office of the Special Inspector General for Troubled Asset Relief Program, 1801 L St. NW, Washington, DC 20220.



Important! To avoid delays, please make sure all pages are complete and accurate.

6635973  
Loan Number

## Section J

## ACKNOWLEDGEMENT AND AGREEMENT

*In making this request for consideration I certify under penalty of perjury:*

1. I understand the Servicer may pull a current credit report on all borrowers obligated on the Note.
2. I am willing to commit to credit counseling if it is determined that my financial hardship is related to excessive debt.
3. If I was discharged in a Chapter 7 bankruptcy proceeding subsequent to the execution of the Loan Documents, or am currently entitled to the protections of any automatic stay in bankruptcy, I acknowledge that Servicer is providing the information about the mortgage relief program at my request and for informational purposes, and not as an attempt to impose personal liability for the debt evidenced by the Note.
4. I understand that if the Servicer offers me a Trial Period Plan and I fail to accept or complete the trial plan for any reason, including, for example, declining the trial plan offer, failing to accept the trial plan offer, failing to make trial plan payments in a timely manner or failing to accept a final modification at the end of the trial period, I may permanently lose eligibility for a modification under the Making Home Affordable Program and any other modification program offered by the Servicer.
5. If I am eligible for a trial period plan, repayment plan or forbearance plan, and I accept and agree to all terms of such plan, I also agree that the terms of this Acknowledgment and Agreement are incorporated into such plan by reference as if set forth in such plan in full. My first timely payment following my Servicer's determination and notification of my eligibility or prequalification for a trial period plan, repayment plan or forbearance plan (when applicable) will serve as acceptance of the terms set forth in the notice sent to me that sets forth the terms and conditions of the trial period plan, repayment plan or forbearance plan.
6. I agree that when the Servicer accepts and posts a payment during the term of any repayment plan, trial period plan or forbearance plan it will be without prejudice to, and will not be deemed a waiver of, the acceleration of my loan or foreclosure action and related activities and shall not constitute a cure of my default under my loan unless such payments are sufficient to completely cure my entire default under my loan.
7. I agree that any prior waiver as to my payment of escrow items to Servicer in connection with my loan has been revoked.
8. If I qualify for and enter into a repayment plan, forbearance plan or trial period plan, I agree to the establishment of an escrow account and the payment of escrow items if an escrow account never existed on my loan.
9. I consent to being contacted concerning this request for mortgage assistance at any email address or cellular or mobile telephone number I have provided to the Lender. This includes text messages and telephone calls to my cellular or mobile telephone.
10. That all of the information in this document is truthful and the hardship(s) identified on page 2 is/are the reason that I need to request a modification of the terms of my mortgage loan, a short sale or a deed-in-lieu of foreclosure.
11. I understand that the Servicer, the U.S. Department of Treasury, owner or guarantor of my mortgage or their agents may investigate the accuracy of my statements and may require me to provide additional supporting documentation. I also understand that knowingly submitting false information may violate federal and other applicable law.
12. I understand that if I have intentionally defaulted on my existing mortgage, engaged in fraud or if it is determined that any of my statements or any information contained in the documentation that I provide are materially false and that I was ineligible for assistance under MHA, the Servicer, the U.S. Department of the Treasury, or their respective agents may terminate my participation in MHA, including any right to future benefits and incentives that otherwise would have been available under the program, and also may seek other remedies available at law and in equity, such as recouping any benefits or incentives previously received.
13. The property that I am requesting mortgage assistance for is able to be lived in and it has not been or is at risk of being condemned. There has been no change in the ownership of the Property since I signed the documents for the mortgage that I want to modify.
14. I am willing to provide all requested documents and to respond to all Servicer questions in a timely manner. I understand that time is of the essence.
15. I understand that the Servicer will use the information in this document to evaluate my eligibility for a loan modification or short sale or deed-in-lieu of foreclosure, but the Servicer is not obligated to offer me assistance based solely on the statements in this document or other documentation submitted in connection with this request.
16. I understand that the Servicer will collect and record personal information, including, but not limited to, my name, address, telephone number, Social Security Number, credit score, income, payment history, government monitoring information and information about account balances and activity. I understand and consent to the disclosure of my personal information and the terms of any mortgage relief or foreclosure alternative that I receive by the Servicer to (a) the U.S. Department of the Treasury; (b) Fannie Mae and Freddie Mac in connection with their responsibilities under the Homeowner Affordability and Stability Plan; (c) any investor, insurer, guarantor or Servicer that owns, insures, guarantees or services my first lien or subordinate lien (if applicable) mortgage loan(s); (d) companies that perform support services in conjunction with any other mortgage relief program; and (e) any HUD-certified housing counselor.
17. I understand that I have the right to a copy of any property valuation used in connection with the decision on the request for a modification. If I want to receive a copy of the valuation, I will submit a request with my name, address and loan number within 90 days of the date that Servicer makes a decision on my request at the following address: Chase, Attn. Research Dept., PO Box 24696, Columbus OH 43224-0696 or by fax at 614-422-7575.
18. If I or someone on my behalf has submitted a FDCPA Cease and Desist notice to my Servicer, I hereby withdraw such notice and understand that Servicer must contact me through the loan modification process or to find other alternatives to foreclosure.



**REQUEST FOR MORTGAGE ASSISTANCE FORM**



Important! To avoid delays, please make sure all pages are complete and accurate.

6635973  
Loan Number

By signing this document, I/we certify that all the information is truthful. I/We understand that knowingly submitting false information may constitute fraud.

PLEASE SIGN & DATE

*Haylm*  
VARGES GEORGE

11-15-2013  
Date

**TO BE COMPLETED BY INTERVIEWER**

This request was taken by:  <input type="checkbox"/> Face-to-face Interview <input type="checkbox"/> Mail <input type="checkbox"/> Telephone <input type="checkbox"/> Internet  Loan Number _____	Interviewer's Name (print or type) & I.D. Number	Name/Address of Interviewer's Employer	
	Interviewer's Signature		Date
	Interviewer's Phone Number (include area code)	Servicer/Interviewer's Email Address	
	Interviewer's Fax Number		

