

# MORTGAGE ASSISTANCE APPLICATION



If you are having challenges making your mortgage payment, please complete and submit this application, along with the required documentation, to Achieva Credit Union. We will contact you within five business days to acknowledge receipt and let you know if additional information or documents are needed. We will use the information you provide to help us identify the assistance you may be eligible to receive. If you need help completing this application, please call the **Mortgage team at 1-866-617-6373, option #2.**

**MEMBER NUMBER:** \_\_\_\_\_ **MORTGAGE LOAN NUMBER:** \_\_\_\_\_

## BORROWER INFORMATION

**BORROWER'S NAME:** \_\_\_\_\_

Social Security Number (last 4 digits): \_\_\_\_\_ E-mail: \_\_\_\_\_

Primary phone number: \_\_\_\_\_  Cell  Home  Work  Other

Alternate phone number: \_\_\_\_\_  Cell  Home  Work  Other

**CO-BORROWER'S NAME:** \_\_\_\_\_

Social Security Number (last 4 digits): \_\_\_\_\_ E-mail: \_\_\_\_\_

Primary phone number: \_\_\_\_\_  Cell  Home  Work  Other

Alternate phone number: \_\_\_\_\_  Cell  Home  Work  Other

## PROPERTY INFORMATION

**PROPERTY ADDRESS:** \_\_\_\_\_

The property is currently:  A primary residence  A second home  An investment property

The property is (select all that apply):  Owner occupied  Renter occupied  Vacant

## HARDSHIP INFORMATION

The hardship causing mortgage payment challenges began on approximately (date) \_\_\_\_\_ and is believed to be:  Short-term (up to 6 months)  Long-term or permanent (greater than 6 months)

**TYPE OF HARDSHIP** (CHECK ALL THAT APPLY) REQUIRED HARDSHIP DOCUMENTATION

Unemployment

Reduction in income: a hardship that has caused a decrease in your income due to circumstances outside your control (e.g., elimination of overtime, reduction in regular working hours, a reduction in base pay)

Other explain: \_\_\_\_\_

## CURRENT BORROWER ASSETS (statements may be requested)

Checking account(s) and cash on hand: \$ \_\_\_\_\_

Savings, money market funds, and Certificates of Deposit (CDs): \$ \_\_\_\_\_

Stocks and bonds (non-retirement accounts): \$ \_\_\_\_\_

Other: \$ \_\_\_\_\_

## HOW TO SUBMIT APPLICATION

After you have completed your application visit [www.achievacu.com/secureapp](http://www.achievacu.com/secureapp) to receive a link to send your application securely or mail to **Achieva Mortgage PO Box 1500, Dunedin, FL 34697** or fax **1-727-445-6315**.

*Continued on the next page.*

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## Borrower Certification and Agreement

1. I certify and acknowledge that all of the information in this Mortgage Assistance Application is truthful, and the hardship I identified contributed to my need for mortgage relief. Knowingly submitting false information may violate Federal and other applicable law.
2. I agree to provide my servicer with all required documents, including any additional supporting documentation as requested, and will respond in a timely manner to all servicer or authorized third party\* communications.
3. I acknowledge and agree that my servicer is not obligated to offer me assistance based solely on the representations in this document or other documentation submitted in connection with my request.
4. I consent to the servicer or authorized third party\* obtaining a current credit report for the borrower and co-borrower.
5. I consent to the disclosure by my servicer, authorized third party,\* or any investor/guarantor of my mortgage loan(s), of any personal information collected during the mortgage assistance process and of any information about any relief I receive, to any third party that deals with my first lien or subordinate lien (if applicable) mortgage loan(s), including Fannie Mae, Freddie Mac, or any investor, insurer, guarantor, or servicer of my mortgage loan(s) or any companies that provide support services to them, for purposes permitted by applicable law. Personal information may include, but is not limited to: (a) my name, address, telephone number, (b) my Social Security number, (c) my credit score, (d) my income, and (e) my payment history and information about my account balances and activity.
6. I agree that the terms of this borrower certification and agreement will apply to any modification trial period plan, repayment plan, or forbearance plan that I may be offered based on this application. If I receive an offer for a modification trial period plan or repayment plan, I agree that my first timely payment under the plan will serve as acceptance of the plan.
7. I consent to being contacted concerning this application for mortgage assistance at any telephone number, including mobile telephone number, or email address I have provided to the lender, servicer, or authorized third party.\*\* An authorized third party may include, but is not limited to, a housing counseling agency, Housing Finance Agency (HFA) or other similar entity that is assisting me in obtaining a foreclosure prevention alternative.

**Borrower signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Co-Borrower signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_



Insured by the NCUA. Equal Housing Lender.