Loan	number:	

Mortgage Assistance Application

If you are having mortgage payment challenges, please complete and submit this application, along with the required documentation, to Associated Bank, N.A. via mail: 1305 Main Street MS 7706, Stevens Point WI 54481, fax: 715-345-4732, or online:

LossMitigation@AssociatedBank.com. We will contact you within five business days to acknowledge receipt and let you know if you need to send additional information or documents.

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 contact Associated Bank, N.A. at 1-866-504-2774.

If you are experiencing a financial hardship you may be eligible for mortgage assistance from your state's housing finance agency or other state or local government agency.

For a list of HUD-approved housing counseling agencies that can provide foreclosure prevention information, or information on state or local government mortgage assistance programs that may be available; contact one of the following federal government agencies:

- The U.S. Department of Housing and Urban Development (HUD) at (800) 569-4287 or www.hud.gov/counseling
- The Consumer Financial Protection Bureau (CFPB) at (855) 411-2372 or www.consumerfinance.gov/mortgagehelp

If you need assistance with translation or other language assistance, HUD-approved housing counseling agencies may be able to assist you. These services are provided without charge.

For additional information on how to avoid foreclosure, including help for military servicemembers, you may also visit Fannie Mae's <u>consumer</u> website. Fannie Mae is the owner of your mortgage loan.

Borrower Information	
Borrower's name	
Social Security Number (last 4 digits):	
E-mail address	
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 address	
Primary phone number	☐ Cell ☐ Home ☐ Work ☐ Other
Alternate phone number Preferred contact method (choose all that apply): Cell phone Home this box indicates your consent for text messaging	Cell Home Work Other phone Mork phone Email Text - checking
Is either borrower on active duty with the military (including the National on active duty, or the surviving spouse of a member of the military who versions are surviving spouse of the military who were surviving spouse of the milit	
Property Information	
Property Address:	
Mailing address (if different from property address):	
• The property is currently: A primary residence A second ho	me An investment property
The property is (select all that apply): ☐ Owner occupied ☐ Renter of	ccupied 🗌 Vacant
- I want to: $\ \square$ Keep the property $\ \square$ Sell the property $\ \square$ Transfer own	ership of the property to my servicer 🔲 Undecided
Is the property listed for sale? Yes No - If yes, provide the listing ag sale by owner" if applicable:	•
Is the property subject to condominium or homeowners' association (HO \$	A) fees? ☐ Yes ☐ No – If yes, indicate monthly dues:

Fannie Mae/Freddie Mac Form 710 April 2023

Hardship Information

IIai	asinp information	
The	hardship causing mortgage payment challenges began o Short-term (up to 6 months) Long-term or permanent (greater than 6 months) Resolved as of (date)	n approximately (date) and is believed to be:
	TYPE OF HARDSHIP (CHECK ALL THAT APPLY)	REQUIRED HARDSHIP DOCUMENTATION
	Unemployment	Not required
	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)	■ Not required
	Increase in housing-related expenses: a hardship that has caused an increase in your housing expenses due to circumstances outside your control (e.g., uninsured losses, increased property taxes, HOA special assessment)	■ Not required
	Disaster (natural or man-made) impacting the property or borrower's place of employment	Not required
	Long-term or permanent disability, or serious illness of a borrower/co-borrower or dependent family member	 Written statement from the borrower, or other documentation verifying disability or illness Note: Detailed medical information is not required, and information from a medical provider is not required
	Divorce or legal separation	 Final divorce decree or final separation agreement OR Recorded quitclaim deed
	Separation of borrowers unrelated by marriage, civil union, or similar domestic partnership under applicable law	 Recorded quitclaim deed OR Legally binding agreement evidencing that the non-occupying borrower or co-borrower has relinquished all rights to the property
	Death of borrower or death of either the primary or secondary wage earner	 Death certificate OR Obituary or newspaper article reporting the death
	Distant employment transfer/relocation	 For active duty service members: Permanent Change of Station (PCS) orders or letter showing transfer. For employment transfers/new employment: Copy of signed offer letter or notice from employer showing transfer to a new location or written explanation if employer documentation not applicable, AND

assistance provided (not required for those with PCS orders) Written explanation describing the details of the hardship ☐ Other – hardship that is not covered above: and any relevant documentation

April 2023 Fannie Mae/Freddie Mac Form 710

Borrower Income

Please enter all borrower income amounts in middle column.

MONTHLY TOTAL BORROWER INCOM	E TYPE & AMOUNT	REQUIRED INCOME DOCUMENTATION
Gross (pre-tax) wages, salaries and overtime pay, commissions, tips, and bonuses	\$	 Most recent pay stub and documentation of year-to-date earnings if not on pay stub OR Two most recent bank statements showing income deposit amounts
Self-employment income	\$	 Two most recent bank statements showing self-employed income deposit amounts OR Most recent signed and dated quarterly or year-to-date profit/loss statement OR Most recent complete and signed business tax return OR Most recent complete and signed individual federal income tax return
Unemployment benefit income	\$	No documentation required
Taxable Social Security, pension, disability, death benefits, adoption assistance, housing allowance, and other public assistance Non-taxable Social Security or disability	\$	 Two most recent bank statements showing deposit amounts OR Award letters or other documentation showing the amount and frequency of the benefits Two most recent bank statements showing deposit
income		 amounts OR Award letters or other documentation showing the amount and frequency of the benefits
Rental income (rents received, less expenses other than mortgage expense)	\$	 Two most recent bank statements demonstrating receipt of rent OR Two most recent deposited rent checks
Investment or insurance income	\$	 Two most recent investment statements OR Two most recent bank statements supporting receipt of the income
Other sources of income not listed above (Note: Only include alimony, child support, or separate maintenance income if you choose to have it considered for repaying this loan)	\$	 Two most recent bank statements showing receipt of income OR Other documentation showing the amount and frequency of the income

Current Borrower Assets

Exclude retirement funds such as a 401(k) or Individual Retirement Account (IRA), and college savings accounts such as a 529 plan.

Checking account(s) and cash on hand	\$
Savings, money market funds, and Certificates of Deposit (CDs)	\$
Stocks and bonds (non-retirement accounts)	\$
Other:	\$

Fannie Mae/Freddie Mac Form 710 April 2023

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, including but not limited to providing mortgage assistance, verifying any data or information contained in this application, and performing audit and quality control reviews. 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, and (f) my tax return and the information contained therein.
- 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:
Co Borrowci Signature.	Datc

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Fannie Mae/Freddie Mac Form 710 April 2023