

HomeCorps: Loan Modification Application Tracking Worksheet

BANK OF AMERICA VERSION

	<u>Provided to AGO</u>	<u>Sent to Servicer</u>	<u>Sent by</u>	<u>Total Pages</u>
<input type="checkbox"/> Initial Application	<input type="checkbox"/> ___/___/___	<input type="checkbox"/> ___/___/___	<input type="checkbox"/> AGO <input type="checkbox"/> Homeowner	_____

	<u>Provided to AGO</u>	<u>Sent to Servicer</u>	<u>Sent by</u>	<u>Pages</u>
<input type="checkbox"/> Financial Worksheet	<input type="checkbox"/> w/ Initial App. <input type="checkbox"/> ___/___/___	<input type="checkbox"/> w/ Initial App. <input type="checkbox"/> ___/___/___	<input type="checkbox"/> AGO <input type="checkbox"/> Homeowner	_____

- Review for:
- ☐ Confirm expenses deducted from pay are not being double counted
 - ☐ Escrow arrearage is included as expense
 - ☐ All rows and columns are filled-in with '0' or 'n/a' as appropriate

	<u>Provided to AGO</u>	<u>Sent to Servicer</u>	<u>Sent by:</u>	<u>Pages</u>
<input type="checkbox"/> RMA	<input type="checkbox"/> w/ Initial App. <input type="checkbox"/> ___/___/___	<input type="checkbox"/> w/ Initial App. <input type="checkbox"/> ___/___/___	<input type="checkbox"/> AGO <input type="checkbox"/> Homeowner	_____

- Review for:
- ☐ All required fields are completed (e.g. HOA dues, BK case#, etc.)
 - ☐ '# of people in household' filled-in.
 - ☐ income, expenses, assets are totaled correctly.
 - ☐ income, expenses, and assets match financial worksheet and UBA.
 - ☐ signed and dated.

	<u>Provided to AGO</u>	<u>Sent to Servicer</u>	<u>Sent by:</u>	<u>Pages</u>
<input type="checkbox"/> Form 710 UBA	<input type="checkbox"/> w/ Initial App. <input type="checkbox"/> ___/___/___	<input type="checkbox"/> w/ Initial App. <input type="checkbox"/> ___/___/___	<input type="checkbox"/> AGO <input type="checkbox"/> Homeowner	_____

	<u>Provided to AGO</u>	<u>Sent to Servicer</u>	<u>Sent by:</u>	<u>Pages</u>
<input type="checkbox"/> Hardship Letter	<input type="checkbox"/> w/ Initial App. <input type="checkbox"/> ___/___/___	<input type="checkbox"/> w/ Initial App. <input type="checkbox"/> ___/___/___	<input type="checkbox"/> AGO <input type="checkbox"/> Homeowner	_____

- Review for:
- ☐ All required fields are completed (e.g. HOA dues, BK case#, etc)
 - ☐ number of people in household, on top right corner of p.2.

(continued on page 2)

	Provided to AGO	Sent to Servicer	Sent by:	Pages
<input type="checkbox"/> 4506T	<input type="checkbox"/> w/ Initial App. <input type="checkbox"/> ____/____/____	<input type="checkbox"/> w/ Initial App. <input type="checkbox"/> ____/____/____	<input type="checkbox"/> AGO <input type="checkbox"/> Homeowner	_____

	Provided to AGO	Sent to Servicer	Sent by:	Pages
<input type="checkbox"/> Utility Bill	<input type="checkbox"/> w/ Initial App. <input type="checkbox"/> ____/____/____	<input type="checkbox"/> w/ Initial App. <input type="checkbox"/> ____/____/____	<input type="checkbox"/> AGO <input type="checkbox"/> Homeowner	_____
Utility Co.: _____			Date of Bill: ____/____/____	
Review for: <input type="checkbox"/> bill is in homeowner's name <input type="checkbox"/> bill is most recent month available				

	Provided to AGO	Sent to Servicer	Sent by:	Pages
<input type="checkbox"/> Tax Return	<input type="checkbox"/> w/ Initial App. <input type="checkbox"/> ____/____/____	<input type="checkbox"/> w/ Initial App. <input type="checkbox"/> ____/____/____	<input type="checkbox"/> AGO <input type="checkbox"/> Homeowner	_____
Review for: <input type="checkbox"/> tax returns include all pages and schedules <input type="checkbox"/> page 2 of form 1040 is signed and dated.				

	Provided to AGO	Sent to Servicer	Sent by:	Pages
<input type="checkbox"/> 3 Pay Stubs	<input type="checkbox"/> w/ Initial App. <input type="checkbox"/> ____/____/____	<input type="checkbox"/> w/ Initial App. <input type="checkbox"/> ____/____/____	<input type="checkbox"/> AGO <input type="checkbox"/> Homeowner	_____
Employer: _____		Period Submitted: ____/____/____ to ____/____/____		
Review for: <input type="checkbox"/> Income changes or gaps should be explained in a LOE.				

	Provided to AGO	Sent to Servicer	Sent by:	Pages
<input type="checkbox"/> 3 Mo. Bank Statements	<input type="checkbox"/> w/ Initial App. <input type="checkbox"/> ____/____/____	<input type="checkbox"/> w/ Initial App. <input type="checkbox"/> ____/____/____	<input type="checkbox"/> AGO <input type="checkbox"/> Homeowner	_____
Bank: _____		Period Submitted: ____/____/____ to ____/____/____		
Review for: <input type="checkbox"/> All pages are included, even blank pages. <input type="checkbox"/> Actual statements, not transaction history or screen print				

END OF BASIC APPLICATION – See page 3 for additional documents which may be required.

ADDITIONAL DOCUMENTS REQUIRED

The following is a list of common circumstances and the additional documents typically required by the bank under each circumstance. This is by no means a complete or exhaustive list and is intended only as a guide to collect documents. If any of these situations apply, you may check the appropriate box and use page 4 to track the collection of the supporting materials.

- ☐ SECOND BORROWER ON MORTGAGE:
 - ☐ Supporting documents for borrower's income; -AND-
 - ☐ Second borrower's bank statements; -AND-
 - ☐ Second borrower's 2011 tax returns (if filed separately)
- ☐ DIVORCE:
 - ☐ Final divorce decree specifying ownership of property and financial obligation for mortgage signed by the court; -OR-
 - ☐ Recorded quitclaim deed evidencing the non-occupying borrower has relinquished all rights in the property.
- ☐ RECEIVING ALIMONY, CHILD SUPPORT, OR SEPARATION INCOME :
 - ☐ Divorce decree or separation agreement specifying amount and duration of the payments signed by the court; -AND-
 - ☐ Bank Statements highlighting the receipt of this income OR signed and dated LOE, explaining why income is not appearing on homeowner's bank statements.
- ☐ SOCIAL SECURITY AND/OR DISABILITY INCOME
 - ☐ Award letter from SSA or appropriate agency stating the amount of benefits due.
- ☐ NON-BORROWER CONTRIBUTIONS (Distinguish non-borrowers carefully from renters)
 - ☐ Non-Borrower Credit Authorization Form; -AND-
 - ☐ Signed & dated LOE from the Non-Borrower stating the amount of the monthly contribution.
 - ☐ Cancelled Checks if available
 - ☐ Highlight contributions on the Bank Statements
- ☐ RENTAL INCOME
 - ☐ Schedule E of tax return showing reported rental income; -OR-
 - ☐ Lease agreement AND highlight deposits on bank statements or provide cancelled checks
- ☐ BUSINESS INCOME / INDEPENDENT CONTRACTOR
 - ☐ Tax return for the business or schedule showing income on homeowner's return. (Schedule C)
 - ☐ Profit and Loss Statement for the last 2 quarters. (BOA has a template P&L)
- ☐ BUSINESS FAILURE
 - ☐ Homeowner's tax return from previous year including all schedules; -AND-
 - ☐ Proof of business failure. (Bankruptcy filing for business, bank statements showing cessation of business, most recent signed and dated quarterly year-to-date P&L)
- ☐ ILLNESS OR DISABILITY OF BORROWER/CO-BORROWER/FAMILY MEMBER
 - ☐ Doctor's certificate of illness or disability; -OR-
 - ☐ Medical bills; -OR-
 - ☐ Proof of monthly insurance benefits or government assistance. (typically an award letter)
- ☐ DEATH OF A BORROWER OR A NON-BORROWER CONTRIBUTOR
 - ☐ Death certificate or obituary.

ADDITIONAL DOCUMENTS: TRACKING WORKSHEET

Document	Provided to AGO	Sent to Servicer	Sent by:	Pages
<input type="checkbox"/> _____	<input type="checkbox"/> w/ Initial App.	<input type="checkbox"/> w/ Initial App.	<input type="checkbox"/> AGO	_____
_____	<input type="checkbox"/> ____/____/____	<input type="checkbox"/> ____/____/____	<input type="checkbox"/> Homeowner	
Reason Provided:				
<input type="checkbox"/> Requested by Servicer as part of application package (RMA, UBA, etc.)				
<input type="checkbox"/> Specifically Requested by Servicer on: ____/____/____				
<input type="checkbox"/> Other: _____				

Document	Provided to AGO	Sent to Servicer	Sent by:	Pages
<input type="checkbox"/> _____	<input type="checkbox"/> w/ Initial App.	<input type="checkbox"/> w/ Initial App.	<input type="checkbox"/> AGO	_____
_____	<input type="checkbox"/> ____/____/____	<input type="checkbox"/> ____/____/____	<input type="checkbox"/> Homeowner	
Reason Provided:				
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<input type="checkbox"/> Specifically Requested by Servicer on: ____/____/____				
<input type="checkbox"/> Other: _____				

Document	Provided to AGO	Sent to Servicer	Sent by:	Pages
<input type="checkbox"/> _____	<input type="checkbox"/> w/ Initial App.	<input type="checkbox"/> w/ Initial App.	<input type="checkbox"/> AGO	_____
_____	<input type="checkbox"/> ____/____/____	<input type="checkbox"/> ____/____/____	<input type="checkbox"/> Homeowner	
Reason Provided:				
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Document	Provided to AGO	Sent to Servicer	Sent by:	Pages
<input type="checkbox"/> _____	<input type="checkbox"/> w/ Initial App.	<input type="checkbox"/> w/ Initial App.	<input type="checkbox"/> AGO	_____
_____	<input type="checkbox"/> ____/____/____	<input type="checkbox"/> ____/____/____	<input type="checkbox"/> Homeowner	
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_____	<input type="checkbox"/> ____/____/____	<input type="checkbox"/> ____/____/____	<input type="checkbox"/> Homeowner	
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