

FedFinancial

Federal Credit Union

11233 Lockwood Drive, Silver Spring, MD 20901

301-881-5626 / Fax: 301-770-5490

ContactUs@FedFinancial.org

Financial Hardship Application Checklist

Required Documentation

- Completed FedFinancial FCU Hardship Application and FedFinancial written request
- Statement
- Income Verification for *Wage-Earners* (last two paystubs and most recent tax return)
- Income Verification for *Self-Employed Borrowers* (last two year's tax returns with supporting schedules) Full Disclosure of All Monthly Obligations (including loan payments, utilities, child care, car insurance, etc.) Disclosure of All Liquid Assets

Members can submit their forms at their local branch or via the following channels:

Mail: FedFinancial Federal Credit Union
11233 Lockwood Drive
Silver Spring, MD 20901

Fax: 301-770-5490

Email: loans@fedfinancial.org

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Financial Hardship Application

I. I am having problems making my monthly payment because of financial difficulties created by:
(Check all options that apply)

- | | | |
|---|---|---|
| <input type="checkbox"/> Military Service | <input type="checkbox"/> Business Failure | <input type="checkbox"/> Divorce/Separation |
| <input type="checkbox"/> Illness | <input type="checkbox"/> Death of Spouse | <input type="checkbox"/> Disability |
| <input type="checkbox"/> Reduced Income | <input type="checkbox"/> Unemployment | |
| <input type="checkbox"/> Medical Bills | <input type="checkbox"/> Job Relocations | |

Other (Please specify) _____

II. I believe that my current hardship is:

- Permanent Temporary, should be over by: _____

III. Please list all loans with FedFinancial FCU that you are requesting assistance on:

Loan Number: _____

Loan Type: (choose from the options below)

- | | |
|--|--|
| <input type="checkbox"/> Credit Card | <input type="checkbox"/> Equity Line of Credit |
| <input type="checkbox"/> Auto Loan | <input type="checkbox"/> Fixed Equity Loan |
| <input type="checkbox"/> Signature Loan and/or Phastcash | |
| <input type="checkbox"/> Other (Please specify) _____ | |

IV. Please include additional details regarding your hardship situation:

IT IS VERY IMPORTANT THAT YOU EXPLAIN YOUR FINANCIAL HARDSHIP

V. I certify that the statements and information provided above are true and complete.

Member Signature

Date

Member Name: _____

Joint Name: _____

Current Mailing Address: _____

Current Mailing Address: _____

Current Property Address: _____
(if different from Mailing Address)

Home #: _____ Work#: _____

Home #: _____ Work# _____

Email: _____ Cell #: _____

Email: _____ Cell #: _____

Employer (Member): _____

Employer (Joint): _____

How Long with this Employer? ___

How Long with this Employer? ___

What is your Gross (Before Taxes) Income? ____
Is this Income Annual ___ Monthly ___

What is your Gross (Before Taxes) Income? ____
Is this Income Annual ___ Monthly ___

Additional Income* _____

Additional Income* _____

* Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

PROPERTY INFORMATION

Property Address (enter P if property is your Primary Residence, PS if pending sale, SH if second home, or R if rental being held for income)	Type of Property	Present Market Value	Amount of Mortgage	Mortgage Payments
Totals		\$	\$	\$

Have you ever filed Bankruptcy? Yes ___ No ___ If yes, when? ___

Are there any liens or judgments against the property? Yes ___ No ___ If yes, please specify: _____

Are there any outstanding judgments against you or are you party to a lawsuit? Yes ___ No ___ If yes, please specify: _____

MONTHLY EXPENSES

Mortgage Payment / Rent (Please circle selection)	\$
Other Mortgage(s)	\$
Auto Loan(s)	\$
Installment Loans	\$
Credit Cards	\$
Medical Bills	\$
Child Support / Alimony Paid	\$
Homeowner Association Fees / Dues (If not included in escrow or mortgage)	\$
Utilities	\$
Other (specify)	\$
TOTAL:	\$

I certify that all statements herein are true and complete. I acknowledge that Section 104 of Title 18 of the U.S. Code makes it a federal crime for anyone to make false statement or reports or willfully overvalue property or securities for the purpose of including or influencing the action of a federal credit union on an application for a loan, extension or renewal of the same, or for the acceptance, release, or substitution of collateral. I expressly authorize any person, partnership, credit reporting agency, association, firm, corporation, or personnel office or officer, upon your request, to furnish you a credit report or other information concerning me relevant to the review and evaluation of this application or any subsequent re-evaluation thereof.

BY: _____
Signature of Member

BY: _____
Signature of Joint

Date: _____