



FCI Lender Services, Inc.

Loan Servicing • Specialty Servicing • Default

Phone: 800-931-2424 Fax: 714-282-5775

## Request for Mortgage Assistance (RMA)

Loan Number: \_\_\_\_\_

FCI Lender Services, Inc. (FCI) is a sub-servicer working at the direction of the Lender and does not have the authority to approve or deny your request for mortgage assistance. You must provide information about yourself and your intentions to either keep or transition out of your property; a description of the hardship that prevents you from paying your mortgage(s) and the assistance you are seeking; information about all your income, expenses and financial assets; and whether you have declared bankruptcy. **IMPORTANT:** The same requirements apply to all ("Applicants") even if they are not obligated under the Note.

To be considered for any of the mortgage assistance options, offered by your Lender, you must provide the following:

- Request for Mortgage Assistance (completed, signed, and dated)
- All required income & hardship documentation (refer to Section B of this RMA).

Please send your documentation via email, fax, or mail and be sure to list your account number on each page for tracking purposes:

(email): [mortgageassistance@trustfci.com](mailto:mortgageassistance@trustfci.com)

(fax): (714) 282-5775

(mail): PO Box 28720

Anaheim, CA 92809-0112

### SECTION A: APPLICANT INFORMATION

<b>Assistance requested:</b>	Loan Modification	Short Payoff	Short Sale/Deed-In-Lieu	Other (describe below)	
<b>The property is currently:</b>	Owner Occupied	Renter Occupied	Vacant/Abandoned		
<b>The property is my (our):</b>	Primary Residence	Second Home	Investment Property		

Borrower		Co-Borrower		Additional Applicant	
Full Name		Full Name		Full Name	
SS# or TIN		SS# or TIN		SS# or TIN	
Date of Birth		Date of Birth		Date of Birth	
Home Number		Home Number		Home Number	
Mobile Number		Mobile Number		Mobile Number	
Work Number		Work Number		Work Number	
Email Address		Email Address		Email Address	

**NOTICE:** When you give us your mobile phone number and/or email address, we have your permission to contact you on that number and/or email about all your accounts serviced by FCI. Your consent specifically allows us to use artificial or prerecorded voice messages and automatic dialing technology for informational and account service calls, but not for telemarketing or sales calls. It may include contact from companies working on our behalf to service your accounts. You may contact us anytime to change these preferences.

<b>Mailing Address</b>					
City		State		Zip Code	

<b>Property Address: (if same as mailing, enter "same")</b>					
City		State		Zip Code	

Monthly Gross Income \$	Monthly Net Income \$	Monthly Gross Income \$	Monthly Net Income \$	Monthly Gross Income \$	Monthly Net Income \$
Wage earner? Yes      No	Provide start date	Wage earner? Yes      No	Provide start date	Wage earner? Yes      No	Provide start date
Self-employed? Yes      No	% of business ownership	Self-employed? Yes      No	% of business ownership	Self-employed? Yes      No	% of business ownership
School Teacher? Yes      No	# of Months Paid Per Year	School Teacher? Yes      No	# of Months Paid Per Year	School Teacher? Yes      No	# of Months Paid Per Year

Has any applicant filed for bankruptcy? Yes      No	If Yes: CH7      CH11      CH13
Filing Date:      Case Number:	Is the bankruptcy discharged? Yes      No      Discharged Date:



**Loan Number:**

**Please enter the details of your hardship & the assistance you are seeking:**

**Request for Mortgage Assistance (RMA)**

Loan Number: \_\_\_\_\_

**SECTION C: INCOME / EXPENSE FOR HOUSEHOLD**

Household Income (Monthly)		Household Expenses/Debts (Monthly)	
Gross Income (before withholdings)	\$	Principal & Interest Payment	\$
Self-employment Income	\$	Second Mortgage Payment	\$
Unemployment Income	\$	Homeowner's Insurance	\$
Social Security / Disability Income	\$	Property Taxes	\$
Annuity / Retirement Income	\$	HOA / Condo / Co-op / Maintenance Fee	\$
*Alimony, Child Support Income	\$	Child Support / Alimony Payments	\$
Gross Rental Income	\$	Credit Cards (minimum payments)	\$
Food Stamps / Public Assistance	\$	Car Payment(s), Gas, Insurance	\$
Other	\$	Personal Loan Payments	\$
<b>Total Monthly Income</b>	<b>\$</b>	School Tuition	\$
<b>Household Assets</b>		Child Care / Pet Care	\$
Checking Account(s)	\$	Dining / Entertainment	\$
Savings Account(s) / Money Market	\$	Groceries	\$
Investments (CDs, Stocks, Bonds)	\$	Utilities	\$
Cash on Hand	\$	Cable / Phone / Internet	\$
Other	\$	Medical (prescriptions)	\$
<b>Total Household Assets</b>	<b>\$</b>	<b>Total Monthly Expenses/Debts</b>	<b>\$</b>

\* Only include alimony, child support, or separation maintenance if you want it considered for this application and repaying the loan.

**SECTION D: CONSENT AND LEGAL NOTICES**

1. All the information in this RMA is truthful and the hardship(s) identified above has contributed to submission of this application.
2. FCI and/or the Lender, and/or their respective agents may investigate the accuracy of my statements and may require me to provide additional supporting documentation.
3. Knowingly submitting false information may violate Federal and other applicable law and I will not be eligible for mortgage assistance.
4. I authorize FCI, and/or the Lender, and/or their respective agents to use a current consumer report to investigate my eligibility for mortgage assistance and the accuracy of the statements and any documentation that I provide in connection with this application. I understand that these consumer reports may include, without limitation, a credit report, and be assembled and used at any point during the application process to assess my eligibility thereafter.
5. 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, FCI, and/or the Lender, and/or their respective agents may terminate my participation in any of the foreclosure prevention alternatives including any right to future benefits and incentives that otherwise would have been available under such programs, and also may seek other remedies available at law and in equity, such as recouping any benefits or incentives previously received.
6. Any property for which I am requesting assistance is a habitable residential property that is not subject to a condemnation notice.
7. FCI and/or its respective agents may send the information I provide to the Lender to evaluate my eligibility for mortgage assistance and foreclosure prevention alternatives, but FCI and/or the Lender, and/or their respective agents are not obligated to offer me mortgage assistance based solely on the representations in this document or other documentation submitted in connection with my request.
8. I am willing to commit to credit counseling if it is determined that my financial hardship is related to excessive debt.
9. FCI will collect and record personal information that I submit in this RMA and during the evaluation process, including, but not limited to, my name, address, telephone number, social security number, credit score, income, payment history, government monitoring information, and information about my account balances and activity. I understand and consent to FCI's disclosure of my personal information to the appropriate regulatory agencies and their respective agents, companies that perform support services, any investor, insurer, guarantor, or servicer that owns, insures, guarantees, or services my first lien or subordinate lien (if applicable) mortgage loan(s) and to any HUD-certified housing counselor.
10. If I or someone on my behalf has submitted a Fair Debt Collection Practices Act Cease and Desist notice to FCI, I hereby withdraw such notice and understand that FCI must contact me throughout the mortgage assistance process or to find other alternatives to foreclosure.
11. 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 FCI 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.
12. I agree that any prior waiver as to my payment of escrow items to the Lender in connection with my loan has been revoked.

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**SECTION E: 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 based on 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 based on visual observation or surname if you have made this request for mortgage assistance in person. **If you do not wish to furnish the information, please check the box below and proceed to the signature section.**

Borrower	Co-Borrower	Additional Applicant
<b>I do not wish to furnish</b>	<b>I do not wish to furnish</b>	<b>I do not wish to furnish</b>
Hispanic or Latino	Hispanic or Latino	Hispanic or Latino
Not Hispanic or Latino	Not Hispanic or Latino	Not Hispanic or Latino
American Indian or Alaska Native	American Indian or Alaska Native	American Indian or Alaska Native
Asian	Asian	Asian
Black or African American	Black or African American	Black or African American
Native Hawaiian or Other Pacific Islander	Native Hawaiian or Other Pacific Islander	Native Hawaiian or Other Pacific Islander
White	White	White
Male	Male	Male
Female	Female	Female

**By signing below, I certify that all information provided herein is truthful. I understand that knowingly submitting false or misleading information may constitute fraud and that I will not be eligible for mortgage assistance.**

Borrower		Co-Borrower		Additional Applicant	
Signature	Date	Signature	Date	Signature	Date

**Homeowner's Hotline**

If you have questions about this document or the general mortgage assistance process, please call FCI. If you have questions about government programs that FCI cannot answer or if you 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.



## IMPORTANT DISCLOSURES

FCI Lender Services, Inc. ("FCI") is committed to professional and courteous service to our customers. Our Customer Service Department is an experienced group of men and women who are trained and dedicated to answering your questions, addressing your concerns, and resolving any and all issues to your satisfaction. If you have any complaints, please call us during our regular business hours at (800) 931-2424 ext. 651, Mon - Fri, 8:00 a.m. - 5:00 p.m., PT.

**OREGON CONSUMERS ONLY:** The Director of the Department of Consumer and Business Services prescribes by rule. Residential mortgage loan servicers are regulated by the Oregon Division of Financial Regulation. To file a complaint, call (888) 877-4894 or visit <http://dfr.oregon.gov>. You can also submit a completed form complaint by email to [dcbs.dfcsmail@oregon.gov](mailto:dcbs.dfcsmail@oregon.gov), by mail to PO Box 14480 Salem, OR 97309-0405, or by fax to 503-947-7862.

**PENNSYLVANIA CONSUMERS ONLY:** The lender retains a security interest in your residential real estate whenever the security interest has not been released.

**COLORADO CONSUMERS ONLY:** FCI Lender Services, Inc.'s Agent in Colorado is Cogency Global Inc., 7700 E. Arapahoe Road, Suite 220, Centennial, Colorado 80112; PH: 303-309-3839.

**TEXAS CONSUMERS ONLY:** COMPLAINTS REGARDING THE SERVICING OF YOUR MORTGAGE SHOULD BE SENT TO THE DEPARTMENT OF SAVINGS AND MORTGAGE LENDING, 2601 NORTH LAMAR, SUITE 201, AUSTIN, TX 78705. A TOLL-FREE CONSUMER HOTLINE IS AVAILABLE AT 877-276-5550. A complaint form and instructions may be downloaded and printed from the Department's website located at [www.sml.texas.gov](http://www.sml.texas.gov) or obtained from the department upon request by mail at the address above, by telephone at its toll-free consumer hotline listed above, or by email at [smlinfo@sml.texas.gov](mailto:smlinfo@sml.texas.gov).

**MASSACHUSETTS CONSUMERS ONLY:** NOTICE OF IMPORTANT RIGHTS YOU HAVE THE RIGHT TO MAKE A WRITTEN OR ORAL REQUEST THAT TELEPHONE CALLS REGARDING YOUR DEBT NOT BE MADE TO YOU AT YOUR PLACE OF EMPLOYMENT. ANY SUCH ORAL REQUEST WILL BE VALID FOR ONLY TEN DAYS UNLESS YOU PROVIDE WRITTEN CONFIRMATION OF THE REQUEST POSTMARKED OR DELIVERED WITHIN SEVEN DAYS OF SUCH REQUEST. YOU MAY TERMINATE THIS REQUEST BY WRITING TO THE CREDITOR.

**NEW YORK CONSUMERS ONLY:** FCI Lender Services, Inc. ("FCI") is registered with the Superintendent of the New York State Department of Financial Services (NMLS #4920). You may obtain information about how to file a complaint about FCI with the New York State Department of Financial Services, by visiting the Department's website at [www.dfs.ny.gov](http://www.dfs.ny.gov) or by calling the Department at 800-342-3736.

**IMPORTANT NOTICE: IF YOU OR YOUR ACCOUNT ARE SUBJECT TO PENDING BANKRUPTCY PROCEEDINGS, OR IF YOU RECEIVED A BANKRUPTCY DISCHARGE ON THIS DEBT, THIS STATEMENT IS FOR INFORMATIONAL PURPOSES ONLY AND IS NOT AN ATTEMPT TO COLLECT A DEBT. IF YOU ARE NOT IN BANKRUPTCY OR DISCHARGED OF THIS DEBT, BE ADVISED THAT FCI IS A DEBT COLLECTOR AND IS ATTEMPTING TO COLLECT A DEBT. ANY INFORMATION OBTAINED WILL BE USED FOR THAT PURPOSE.**