

COVID-19 Forbearance Application Form

If you are having mortgage payment challenges as a result of the COVID-19 pandemic, please complete and submit this application to us by mail to 13216 Broadway, Alden, NY 14004, Attention: Loan Operations. We will contact you within five business days to acknowledge receipt and let you know if we need 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 us at (716) 937-3381.

BORROWER:		CO-BORROWER:		
Borrower's Name:		Co-Borrower's Name:		
SSN:		SSN:		
DOB:		DOB:		
Property Address:		Best Phone Number:		
		Email Address:		
I want to: ☐ Keep the Property ☐ Sell the Property ☐ Vacate the Property				
The property is my: ☐ Primary Residence ☐ Second Home				
The property is: ☐ Owner Occupied ☐ Vacant				
IF SELLING THE PROPERTY				
Is the property listed for sale? \square Yes \square No				
If yes, what is the listing date?				
If the property has been listed, do you have an offer on the property? \Box Yes \Box No				
Date of the offer:		Amount of the offer:		
Agent's Name:		Agent's Number:		
Is property For Sale by O	wner? \square Yes \square No			
BANKRUPTCY INFORMATION				
Have you filed for bankruptcy? ☐ Yes ☐ No If yes, what is the filing date?				
If Yes? ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13				
Has your bankruptcy bee	n discharged? □Yes	Bankruptcy Case Number:		
□ No				
ACTIVE DUTY SERVICE MEMBER INFORMATION				
Is any borrower an active duty service member? Yes No				
Has any borrower been deployed away from his/her primary residence or received a Permanent				
Change of Station order? ☐ Yes ☐ No				
Is any borrower the surviving spouse of a deceased service member who was on active duty at the				
time of death? Yes No				
ADDITIONAL LIENS				
Do you have any additional liens on this property? $\ \square$ Yes $\ \square$ No				
If yes, please provide the below information:				
Lienholder Name:	Balance of Lien:	Payment Amount:	Account Number:	
Lienholder Name:	Balance of Lien:	Payment Amount:	Account Number:	
TAXES				
Are property taxes on the property current? \square Yes \square No				

	HARDSHIP	AFFIDAVIT		
I am r	equesting review of my current financial situation	to determine whether I qualify for temporary mortgage		
loan r	· · · · · · · · · · · · · · · · · · ·	ardship causing mortgage payment challenges began on elieved to be short term (up to 6 months).		
_	household income has been reduced. For	\square My monthly debt payments are excessive and I am		
_	ole: unemployment, underemployment, reduced	overextended with my creditors. Debt includes credit		
	hours, decline in business earnings, death, lity or divorce of a borrower or co-borrower.	cards, home equity or other debt.		
	expenses have increased. For example: monthly	☐ My cash reserves, including all liquid assets, are		
mortgage payment reset, high medical or health care		insufficient to maintain my current mortgage payment		
costs, uninsured losses, increased utilities or property		and cover basic living expenses at the same time.		
taxes.	n subject to an am earing for an individual	I am unable to work because I am earing for my		
☐ I am subject to or am caring for an individual subject to a federal, state, or local quarantine due to		☐ I am unable to work because I am caring for my child(ren) whose school or place of care is unavailable		
concerns related to COVID-19.		or closed due to COVID-19.		
☐ Death of a borrower or death of either the primary		☐ Disaster (natural or man-made) adversely impacting		
or secondary wage earner in the household		the property or borrower's place of employment		
☐ Otl				
Additi	onal information (please be as detailed as possible	e and add another sheet if needed):		
<u> </u>				
Borrow	er/Co-Borrower Acknowledgement and Agreeme	ent		
	ng this request for consideration, I certify under			
1.				
	to request assistance on my mortgage loan at this time.			
2.				
	require me to provide supporting documentation. I	also understand that knowingly submitting false		
	information may result in foreclosure and may viola			
3.	3. I understand that if I have intentionally defaulted on my existing mortgage, engaged in fraud or misrepresente			
		ank may cancel any loss mitigation agreement and may		
	pursue foreclosure on my home.			
4.	4. I am willing to provide all requested documents and to respond to all Bank questions in a timely manner.			
5.	5. I understand that the Bank will use the information in this document to evaluate my eligibility for a loss			
		o offer me assistance based solely on the statements in this		
6.	document. Lunderstand the Bank may obtain a consumer cred	it report in connection with this application and that I will be		
0.		er report was requested and, if such report was requested,		
	informed of the name and address of the consume			
7.		st for mortgage assistance at any telephone number,		
	including mobile telephone number, or email addre			

For all first lien mortgage accounts: You have the right to receive a copy of all written appraisals or valuations developed in connection with a loan modification application.

Co-Borrower Signature

Date

Borrower Signature

Date