PNC Mortgage

Requirements from Borrower:

3rd Party Authorization (attached)

Most recent tax return (Please include all schedules and W2)

2 most recent pay stubs

2 months most recent bank statements

Hardship letter (attached or typed)

Financial Statement (attached-completed to its entirety)

Mortgage Statement for all loans

HOA info on Short Sale Information Summary attached)

Utility Bill

Please forward them to

Gabriela Hanson 7065 Indiana Ave, Ste 200 Riverside, Ca 92506 Email to gabby@shortsaleprocessor.org Fax to 951-346-0492 Attn: Gabby

Thank You for your cooperation



Short Sale Information Summary

Property Address:		
Borrowers Name:		Last 4 social #:
Co-Borrowers Name:		Last 4 social #:
Mailing Address:		Home #
Borrower Mobile #:	Co-Borrowe	r Mobile #:
Tenants (if any):		Tenants #:
1st Note:		Loan #:
# months delinquent:		
Notice of Default Filed: Y N	Date issued:	
Notice of Trustee Sale filed: Y N		
2nd Note:		Loan #:
# months delinquent:		
Notice of Default Filed: Y N	Date issued:	
Notice of Trustee Sale filed: Y N		
3rd Note:		Loan #:
# months delinquent:		
Notice of Default Filed: Y N	Date issued:	
Notice of Trustee Sale filed: Y N		
Brief Reason for Default:		
HOA Info & phone #:		# months delinquent:
Property taxes : current // delinquent	// impounded	Annual Tax:
Escrow Co.:		Escrow Contact:
Main #:	Fax #	Email:
Title Company:	Title	e Rep:

THIRD PARTY AUTHORIZATION FORM

I hereby authorize	to discuss the account with the	
individual(s) that I have identified below as my design		
Agent"). Further,	_is hereby authorized to negotiate the	terms of a work-out
agreement with my Designated Agent and to delive	er documents to my Designated Agent	which
concern my request for payment assistance and ch	ange of loan terms. I understand that	I will be fully responsible
for reviewing any information that is sent by	to my Design	ated Agent. This
Authorization will remain effective until I specifically	notify	-
in writing that this authorization is no further in force	e and effect.	
My Designated Agents Are: Keller Williams Real 7065 Indiana Ave Ste 200, Riverside, CA 92506	ty	
Gabriela Benitez-Hanson	951-329-9119 ext 304	<u>-</u>
	Phone #	ng ^{ij} a N
Gabriel Gonzalez	951-329-9119 ext 304	* *.* _
	Phone #	
	Phone #	
7	3	. .
*		
Loan #		
Last Four digits of SSN		
Date:	Borrower	
Date:	Cohorrower	· _
	L-ODOLLOWEL	

Financial Worksheet

	<u>Amount</u>		<u>Amount</u>	
Question Panel				
How many people are in your household (including yourself)		How much do you have in Voluntary Funds?		
Income				
Borrower # 1 Monthly Income from Employment		Borrower #1 - Frequency of Pay Period		
Borrower # 1 Monthly Governmental Benefits & Insurance Income		Borrower # 1 Monthly Unemployment Income		
Borrower # 2 Monthly income from Unemployment		Borrower # 2 Frequency of Pay Period		
Borrower # 2 Monthly Governmental Benefits & Insurance Income		Borrower # 2 Monthly Unemployment Income		
Monthly Rental Income		Monthly Alimony Income		
Monthly Child Support Income		Other Monthly Income Description		
Other Monthly Income		Total Monthly Income		
Expenses Family				
Monthly Auto Maintainence		Monthly Food		
Monthly Medical/Dental		Monthly Alimony Paid		
Monthly Child Support Paid		Monthly Child Care		
Monthly Entertainment		Monthly Tuition School Expenses		
Other Monthly Family Expenses Description		Other Monthly Family Expenses		
Total Monthly Family Expenses				
Home				
Monthly Taxes		Monthly Home Repairs		
Other Monthly Home Expenses Description		Other Monthly Home Expenses		
HOA Monthy DUES		Total Monthly Home Expenses		
Utilities				
Monthly Cable TV		Monthly Electricity		
Monthly Natural Gas		Monthly Phone/Internet	ne/Internet	
Monthly Sewer/Water		Other Monthly Utility Expenses Description		
Other Monthly Utility Expenses		Total Monthly Utility Expenses		
Work				
Monthly Dry Cleaning		Monthly Parking		
Monthly Union Dues		Other Monthly Work Expenses Description		
Other Monthly Work Expenses		Total Monthly Work Expenses		

Insurance	
Monthly Auto Insurance	Monthly Health Insurance
Monthly Life Insurance	Other Monthly Insurance Description
Other Monthly Insurance Expenses	Total Monthly Insurance Expenses
Contributions	
Monthly Church/Charity Contributions	Other Monthly Contributions Expenses Description
Other Monthly Contributions Expenses	Total Monthly Contributions Expenses
Debt - Auto	
Monthly Auto Payment 1	Monthly Auto Payment 2
Total Monthly Auto Payments	
Debt - Credit Card	
Monthly Credit Card Payment 1	Monthly Credit Card Payment 2
Monthly Credit Card Payment 3	Monthly Credit Card Payment 4
Total Credit Card Payment	
Debt - Mortgage	
1st Lien Monthly Payment Resident	2nd Lien Monthly Payment Resident
Monthly Student Loan Payments	Other Monthly Loan 1 Description
Other Monthly Loan 1 Payment	Other Monthly Loan 2 Description
Other Monthly Loan 2 Payment	Total Monthly Mortgage/Loans
Assets	
Home	401 K Accounts
Automobile	Checking Account
Savings Account	IRA/Keogh Accounts
Stocks/Bonds	Motor Home/Travel Trailers
Other Recreational Vehicles	Real Estate
Other Asset Descriptions	Other Assets
Asset Total	

Please complete to the best of your knowledge and complete to it entirety.

Explanation of Hardship

What changes or events have occur	red since your loan originated that have caused you to fall behind?
	<u> </u>
	<u>, </u>
When did the change(s) and/or ever	nt(s) occur?
	<u> </u>
Do you anticipate any improvement YN	in your financial situation in the near future?
Acknowlegement: I (we) acknowledge that the financia	I information provided is an accurate statement of my (our) financial status
By:	Date:
Signed Borrower	
Bv:	Date:
By:Signed Co-Borrower	