



### **Arrowhead Credit Union Loan Modification/Extension Requirements**

In order to review your request and determine the best decision, please complete and return the following:

- Extension/Modification Worksheet
- Copy of most up-to-date pay stub with year-to-date information for all borrowers
  - If you are self-employed, the last two years completed tax returns
  - All income will need to be documented and supported
- Two months of bank statements
- Copy of your most recent first mortgage monthly statement (mortgage modification or extension only)

Submit the required documents by faxing (909) 379-6959, emailing [loanmodifications@arrowheadcu.org](mailto:loanmodifications@arrowheadcu.org), or mailing to Arrowhead Credit Union, Attention Collections Department #083 at PO Box 4100 in Rancho Cucamonga, CA 91729-9998.

Upon receiving your application form and documents, we may contact you for further information. We will make every attempt to finalize your request within thirty days of submission and notify you of the decision.

#### **We're Here to Help**

If you have any questions, please contact us at (909) 383-7370.

Thank you,

Collections Department  
Arrowhead Credit Union

## Extension/Modification Worksheet

<b>BORROWER</b>		
Name:	Member #:	
Social Security #:	Birth Date:	Number of Dependents:
Address (Physical):		
Home Phone:	Cell Phone:	
Email:		

<b>CO-BORROWER</b>		
Name:	Member #:	
Social Security #:	Birth Date:	Number of Dependents:
Address (Physical):		
Home Phone:	Cell Phone:	
Email:		

<b>Employment – Borrower</b>		<b>Employment – Co-Borrower</b>	
Employer's Name:		Employer's Name:	
Employer's Address:		Employer's Address:	
Hire Date:		Hire Date:	
Department:		Department:	
Work Phone and Extension:		Work Phone and Extension:	
<b>Monthly Income – Borrower</b>		<b>Monthly Income – Co-Borrower</b>	
Gross Wages, frequency: _____	\$	Gross Wages, frequency: _____	\$
Unemployment Income:	\$	Unemployment Income:	\$
Child Support/Alimony	\$	Child Support/Alimony	\$
Disability Income/SSI	\$	Disability Income/SSI	\$
Rents Received	\$	Rents Received	\$
Other: _____	\$	Other: _____	\$
Commissions/Bonus/ Self-Employed Income	\$	Commissions/Bonus/ Self-Employed Income	\$
Less: Federal/State Tax/FICA	\$	Less: Federal/State Tax/FICA	\$
Less: Other Deductions (401k, etc.)	\$	Less: Other Deductions (401k, etc.)	\$
<b>Total Net Income</b>	<b>\$</b>	<b>Total Net Income</b>	<b>\$</b>

Monthly Expenses – Borrower		Monthly Expenses – Co-Borrower	
Mortgage/Liens/Rent	\$	Mortgage/Liens/Rent	\$
Auto Loan(s)	\$	Auto Loan(s)	\$
Auto Expenses/Insurance	\$	Auto Expenses/Insurance	\$
Credit Cards/Installment Loan(s) (total minimum payment, per month)	\$	Credit Cards/Installment Loan(s) (total minimum payment, per month)	\$
Health Insurance (not withheld from pay)	\$	Health Insurance (not withheld from pay)	\$
Medical (co-pays and Rx)	\$	Medical (co-pays and Rx)	\$
Child Care/Support/Alimony	\$	Child Care/Support/Alimony	\$
Food/Spending Money	\$	Food/Spending Money	\$
Water Sewer Utilities Phone	\$	Water Sewer Utilities Phone	\$
HOA/Condo Fees/Property Maintenance	\$	HOA/Condo Fees/Property Maintenance	\$
Life Insurance Payments (not withheld from pay)	\$	Life Insurance Payments (not withheld from pay)	\$
<b>Total Monthly Expenses</b>	<b>\$</b>	<b>Total Monthly Expenses</b>	<b>\$</b>

Monthly Assets – Borrower		Monthly Assets – Co-Borrower	
Checking Balance	\$	Checking Balance	\$
Savings Balance	\$	Savings Balance	\$
Money Market Balances	\$	Money Market Balances	\$
Stocks/Bonds/CD Balances	\$	Stocks/Bonds/CD Balances	\$
IRA/Retirement Balances	\$	IRA/Retirement Balances	\$
401(k) Balance	\$	401(k) Balance	\$
Home Value	\$	Home Value	\$
Other Real Estate Value	\$	Other Real Estate Value	\$
Auto(s), quantity: _____	\$	Auto(s), quantity: _____	\$
Life Insurance (Whole Life, not Term)	\$	Life Insurance (Whole Life, not Term)	\$
Other: _____	\$	Other: _____	\$
<b>Total Monthly Assets</b>	<b>\$</b>	<b>Total Monthly Assets</b>	<b>\$</b>

<b>COUNSELING</b>		
Have you contacted a credit-counseling agency for help? (if yes, complete counselor contact information below)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Counselor's Name:		
Counselor's Phone Number:	Counselor's Email:	

<b>BANKRUPTCY</b>		
Have you filed for bankruptcy?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, what Chapter?	Chapter 7 <input type="checkbox"/>	Chapter 13 <input type="checkbox"/>
Has your bankruptcy been discharged? (if yes, provide a copy of the discharge order signed by the court)	Yes <input type="checkbox"/>	No <input type="checkbox"/>

<b>REAL ESTATE</b>		
Working with a HUD counselor, such as NID, can improve your chances of obtaining the best modification for your needs. Contact NID at (909) 887-8700 or nidonline.org for help in obtaining a modification on your first mortgage. <b>There is no fee for this service.</b>		
Have you requested a loan modification from your first mortgage holder?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If you have requested or received a first mortgage modification, what is the status and/or approval terms? (submit any supporting documents)		
What steps have you taken to reduce your monthly cash outflow? (you may use on a separate sheet of paper)		
What amount do you feel you can afford to make toward your Arrowhead Credit Union loan per month?	\$	
Physical location of collateral (address):		
Do you occupy the property?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is it a rental property?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is it leased? (if you have a lease agreement, provide a copy)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is the property listed for sale? (if yes, provide a copy of the listing agreement)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Agent's Name:		
Agent's Phone Number:	Agent's Email:	
Do you receive, and pay, the real estate tax bill on your home, or does your lender pay it for you? (if you pay it, provide a copy of your tax statement)	I Do <input type="checkbox"/>	My Lender Does <input type="checkbox"/>
Are the taxes current?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you pay for a hazard insurance policy? (if you pay it, provide a copy of the policy)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is the policy current?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

**MODIFIED REAL ESTATE FIRST TRUST DEED (NON ARROWHEAD CREDIT UNION)**

Mortgage Holder:		
Mortgage Date:	Mortgage Value:	Modification Date:
Modified Loan Payment:	Difference in Payment:	Amount Owed:

**OTHER REAL ESTATE LOANS ON RESIDENCE (NON ARROWHEAD CREDIT UNION)**

Mortgage Holder:		
Mortgage Date:	Modification Date:	
Modified Loan Payment:	Difference in Payment:	Amount Owed:

**REFERENCES**

1.	Name:	Phone:	Relationship:
	Address:		
2.	Name:	Phone:	Relationship:
	Address:		
3.	Name:	Phone:	Relationship:
	Address:		

**Reason for Modification (explain in detail – use separate sheet if needed)**

I agree to the following: My lender may discuss, obtain and share information about my loans and personal financial situation with third parties such as purchasers, real estate brokers, insurers, financial institutions, creditors and credit bureaus. Discussions and negotiations of a possible foreclosure alternative will not constitute a waiver of or defense to my lender's right to commence or continue any foreclosure or other collection action, and an alternative to foreclosure will be provided only if an agreement has been approved in writing by my lender. The information herein is an accurate statement of my financial status. I consent to being contacted concerning my loans at any phone number I may have. This may include text messages and phone calls to my mobile phone. **Note: Bankruptcy Accounts discharged "debt" is not collectible; however, Arrowhead Credit Union does allow voluntary repayment.**

Borrower Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Co-Borrower Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

**Before submitting, please make sure you have signed and dated the form, as well as included all appropriate documentation. Incomplete applications may be declined.**