



FINANCIAL HARDSHIP FORM

BORROWER INFORMATION

BORROWER		CO-BORROWER	
Name		Name	
SS #		SS #	
Home Phone #	Work Phone #	Home Phone #	Work Phone #
Mailing Address		Mailing Address	
Dependents <i>(how many and ages)</i>		Dependents <i>(not listed by borrower)</i>	

INCOME INFORMATION

BORROWER		CO-BORROWER	
Employer		Employer	
Position	Start Date	Position	Start Date
Gross Wages		Gross Wages	
Frequency of Pay		Frequency of Pay	
Child Support		Child Support	
Alimony		Alimony	
Social Security Income		Social Security Income	
Unemployment Income		Unemployment Income	
Disability Income		Disability Income	
Rental Income		Rental Income	
Other Income ()		Other Income ()	
Other Income ()		Other Income ()	

****NEED INCOME VERIFICATION FOR ALL SOURCES OF INCOME****

FINANCIAL HARDSHIP FORM

ASSETS / LIABILITIES

DESCRIPTION	ESTIMATED VALUE	AMOUNT OWED	NET VALUE
Personal Residence	\$	\$	\$
Secondary Home	\$	\$	\$
Checking Accounts	\$	\$	\$
Savings Accounts	\$	\$	\$
IRA / 401K / Keogh Accounts	\$	\$	\$
Stocks / Bonds / CDs	\$	\$	\$
Cash Value of Life Insurance	\$	\$	\$
Other	\$	\$	\$
TOTALS	\$	\$	\$

EXPENSES

DESCRIPTION	MONTHLY PAYMENT	BALANCE DUE	DELINQUENT	YES	NO
First Mortgage	\$	\$		<input type="radio"/>	<input type="radio"/>
Second Mortgage	\$	\$		<input type="radio"/>	<input type="radio"/>
Third Mortgage	\$	\$		<input type="radio"/>	<input type="radio"/>
Liens (Judgements, Taxes)	\$	\$		<input type="radio"/>	<input type="radio"/>
Alimony / Child Support	\$	\$		<input type="radio"/>	<input type="radio"/>
Homeowners Association Dues	\$	\$		<input type="radio"/>	<input type="radio"/>
Child Care	\$	\$		<input type="radio"/>	<input type="radio"/>
Health Insurance	\$	\$		<input type="radio"/>	<input type="radio"/>
Medical	\$	\$		<input type="radio"/>	<input type="radio"/>
Credit Card(s) (TOTAL)*	\$	\$		<input type="radio"/>	<input type="radio"/>
Auto Loan #1	\$	\$		<input type="radio"/>	<input type="radio"/>
Auto Loan #2	\$	\$		<input type="radio"/>	<input type="radio"/>
Auto Loan #3	\$	\$		<input type="radio"/>	<input type="radio"/>
Auto Insurance	\$	\$		<input type="radio"/>	<input type="radio"/>

***PLEASE PROVIDE COMPLETE DETAILED INFORMATION ABOUT ALL CREDIT CARDS ON PAGE 3.**

FINANCIAL HARDSHIP FORM

EXPENSES (continued)

DESCRIPTION	MONTHLY PAYMENT	BALANCE DUE	DELINQUENT YES NO	
Auto Expenses / Gasoline	\$	\$	<input type="radio"/>	<input type="radio"/>
Food / Spending Money	\$	\$	<input type="radio"/>	<input type="radio"/>
Water / Sewer	\$	\$	<input type="radio"/>	<input type="radio"/>
Gas / Electric	\$	\$	<input type="radio"/>	<input type="radio"/>
Cable / Dish	\$	\$	<input type="radio"/>	<input type="radio"/>
Phone	\$	\$	<input type="radio"/>	<input type="radio"/>
Cell Phone	\$	\$	<input type="radio"/>	<input type="radio"/>
Other	\$	\$	<input type="radio"/>	<input type="radio"/>

COMPREHENSIVE CREDIT CARD INFORMATION (from page 2)

DESCRIPTION	MONTHLY PAYMENT	BALANCE DUE	DELINQUENT YES NO	
	\$	\$	<input type="radio"/>	<input type="radio"/>
	\$	\$	<input type="radio"/>	<input type="radio"/>
	\$	\$	<input type="radio"/>	<input type="radio"/>
	\$	\$	<input type="radio"/>	<input type="radio"/>
	\$	\$	<input type="radio"/>	<input type="radio"/>
	\$	\$	<input type="radio"/>	<input type="radio"/>
	\$	\$	<input type="radio"/>	<input type="radio"/>
	\$	\$	<input type="radio"/>	<input type="radio"/>
	\$	\$	<input type="radio"/>	<input type="radio"/>
	\$	\$	<input type="radio"/>	<input type="radio"/>
	\$	\$	<input type="radio"/>	<input type="radio"/>
	\$	\$	<input type="radio"/>	<input type="radio"/>
	\$	\$	<input type="radio"/>	<input type="radio"/>
	\$	\$	<input type="radio"/>	<input type="radio"/>
	\$	\$	<input type="radio"/>	<input type="radio"/>
TOTALS	\$	\$		

FINANCIAL HARDSHIP FORM

TERMS AND CONDITIONS

I/we understand that the financial information I'm/we're providing will be used to determine if I/we qualify for any workout options available through the lender and/or insurer of my mortgage and/or other loan. I/we further understand that approval to participate in any workout options will be based on the information I'm/we're providing. Additionally, I/we understand that submitting this form neither expressly nor implicitly guarantees my/our qualification for any loss mitigation program.

I/we certify that the information included on this form is true, accurate and complete to the best of my/our knowledge. I/we understand that I/we will be held liable for any and all losses or damages incurred by the lender and/or insurer of my mortgage and/or other loan as a result of any accurate information knowingly provided by me/us, or any misrepresentation on my/our part.

Upon notification by Northern States Power St. Paul Credit Union, I/we fully understand that I/we will be required to submit, under separate cover and within a time frame determined by Northern States Power St. Paul Credit Union, copies of my/our last two bank statements, my/our most recent Federal tax return(s), copies of my/our last two pay stubs and any other documentation requested from Northern States Power St. Paul Credit Union for the purposes of qualifying me/us for a loss mitigation program.

To be considered for any workout options, I/we further understand that Northern States Power St. Paul Credit Union must independently verify financial information by obtaining a credit report and any other form of verification Northern States Power St. Paul Credit Union deems appropriate. By signing below and submitting this form, I/we agree to these terms and conditions and authorize Northern States Power St. Paul Credit Union to obtain a credit report and verify employment or assets to facilitate the processing of this request.

Signature of Borrower _____

Signature of Co-Borrower _____