

DELINQUENCY STATUS AND RECOMMENDATION FORM

APPENDIX CFORM 6A (Revised 11/01/01)

**DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT (DHCD)
DELINQUENCY STATUS AND RECOMMENDATION**

ACTION (Circle One): FORECLOSURE DEED IN LIEU BANKRUPTCY LSM SHORT SALE
HOLD/FORBEARANCE HOLD/REFINANCE LOAN MODIFICATION
OTHER (list) _____

Borrower: _____ Soc. Sec. No.: _____
Borrower: _____ Soc. Sec. No.: _____
Property: _____ Mailing _____
Address: _____ Address: _____
Borrower Home Phone # _____ Borrower Work # _____
DHCD/CDA Loan Number: _____
Servicer : _____ Servicer #: _____

Loan Type: (Circle One): CDA/BOND DHCD/STATE FUNDED
Prim Insurer: FHA VA RHS MHF PMI/other Ins. No.: _____
Pool Insurer: MHF GE/VEREX MGIC None Ins. No. _____

Original Loan Amt.: \$ _____ Closing Date: _____ !st Legal Deadline: _____
Principal Balance: \$ _____ Paid to Date: _____
Mortgage Pymt: \$ _____ Interest Rate: _____% Late Charge: \$ _____/mo.
Escrow Balance: \$ _____ (+ -) Suspense Balance: \$ _____
Ground Rent: _____/mo. Last Paid: _____ Taxes \$ _____/yr. Tax Year _____
Ground Rent Holder Name: _____
Address: _____

Cause of Default: _____
Housing Counseling Recommended: Yes No If No, why not:- _____
Loss Mitigation options discussed with borrower (Yes or No): Forbearance _____
Short Sale _____ Refinance _____ Deed In Lieu _____ Loan Mod _____
Borrower made offer to cure/payment proposal? Yes (attach copy) _____ No _____
Date loss mitigation letters sent: _____
Date Acceleration Letter Sent: _____ Borrower response: _____

Property Inspection Date: _____ Prop. Value: \$ _____
Property Vacant/Abandoned? _____ If Vacant, secured? _____ Boarded? _____
For Sale? _____ Realtor Name/Phone: _____

Bankruptcy Case # _____ Chapter # _____
Post-Petition Payments due date(s) _____ Monthly post-petition due \$ _____
Total post-petition due \$ _____

Servicer Evaluation of Account and Borrower's Reason for Default (attach additional sheets if needed):

Servicer Contact Person: _____ Phone: _____
Address: _____ Fax: _____
Email: _____

-----BELOW FOR DHCD USE ONLY-----

Recommendation Approved By: _____ Date: _____
SFC Asset Management Officer

Case Assigned to (Circle One): Curran &O'Sullivan Shulman/Rogers/Gandal Huesman/Jones/Miles

Date Assigned: _____