



Request for Short Sale Approval

Complete all four pages of this form.

Please return this packet with the following items for Short Sale review:

Verification of present income:

- Wage earners (meaning that you receive a W-2 from your employer): Two most recent, consecutive pay stubs showing year-to-date (YTD) earnings.
- Self-employed: A profit/loss statement from the most recent full year and YTD for current year.
- Social Security, disability, death benefits, pension, public assistance, or unemployment: Benefit statement or award letter from provider that states amount and frequency.
- Rental income: Copies of the current lease agreement
- Purchase agreement
- Hud 1 (Real estate only)
- Senior Lien Holder Approval Letter(s) (Real estate only)
- 3 most recent consecutive bank statements

Important items to note:

1. Please submit ALL requested information at the same time. Documents received separately may result in delays in processing your request.
2. If there are multiple signers on the Note, the above information must be received for all signers.*
3. Be advised that in order to complete your request we will contact you to review your information. Please be prepared to discuss the personal household expenses outlined in the attached template. Additional items may be requested after our initial review of your case.
4. The collection of this debt will continue during our review of your workout request, unless otherwise prohibited by law.
5. This program and our requirements thereto are subject to change or cancellation at any time with no notice to you.

Using one of the following methods, please send all requested packet information together and not separately.

FAX: 216-370-5819 (use fax cover sheet included)

EMAIL: loss_mitigation@keybank.com

U.S. MAIL ADDRESS: KeyBank
Attn: Short Sales Requests
MailCode: OH-01-51-4002
4910 Tiedeman Road
Brooklyn, OH 44144

* If you were discharged in a Chapter 7 bankruptcy proceeding subsequent to the execution of the Loan Documents, or are currently entitled to the protections of any automatic stay in bankruptcy, please note that the Servicer is providing information about available workout programs at your request and for informational purposes, and not as an attempt to impose personal liability for the debt evidenced by the Note.



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Loan ID number:

Borrower

Co-Borrower

Borrower's name

Co-Borrower's name

Social Security number Date of birth

Social Security number Date of birth

Home phone number with area code

Home phone number with area code

Cell or work phone number with area code

Cell or work phone number with area code

Mailing address

Property address (if different from Mailing address)

Is the property listed for sale? Yes No For sale by owner? Yes No

Real estate agent's name Real estate agent's phone number with area code

Real estate agent's email Real estate agent's fax number with area code

Have you received an offer on the property? Yes No

Do we have your authorization to release information regarding the short sale to the real estate agent listed above? Yes No

Additional liens/mortgages or judgments on this property

Lien-holder's name/servicer:	Balance:	Contact number:	Loan number:

Hardship affidavit

(I am/we are) requesting a review under KeyBank's Short Sale program.

(I am/we are) having difficulty making (my/our) monthly payment because of financial difficulties created by

My household income has been reduced. For example: unemployment, underemployment, reduced pay or hours, decline in business earnings, death, disability, or divorce of a borrower or co-borrower.

My expenses have increased. For example: monthly mortgage payment reset, high medical or health care costs, uninsured losses, increased utilities or property taxes.

- Provide a detailed explanation of the hardship (continue on another sheet of paper if necessary). This request cannot be reviewed without this information.



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Income/Assets for household¹

Number of people in household:

Monthly household income

Monthly gross wages:	\$
Overtime:	\$
Child support/Alimony/Separation ² :	\$
Social Security/SSDI:	\$
Other monthly income from pensions, annuities or retirement plans:	\$
Tips, commissions, bonuses, and self-employed income:	\$
Rents received:	\$
Unemployment income:	\$
Food stamps/Welfare:	\$
Other (investment income, royalties, interest, dividends, etc.):	\$
Total (gross income):	\$

Household assets

Checking account(s):	\$
Checking account(s):	\$
Savings/Money Market Account(s):	\$
CDs:	\$
Stocks/Bonds:	\$
Other cash on hand:	\$
Other real estate (estimated value):	\$
Other:	\$
Other:	\$
Do not include the value of life insurance or retirement plans when calculating assets (401k, pension funds, annuities, IRAs, Keogh plans, etc.).	
Total assets:	\$

Income must be documented.

¹ Include combined income and assets from the borrower and co-borrower (if any). If you include income and expenses from a household member who is not a borrower, please specify below:

You are not required to disclose child support, alimony or separation maintenance income, unless you choose to have it considered by your servicer.

Monthly household debt/expenses

First mortgage payment:	\$
Second mortgage payment:	\$
Homeowner's insurance:	\$
Property taxes:	\$
Personal insurance:	\$
Credit cards/Installment loan(s) (total minimum payment per month):	\$
Alimony, child support payments:	\$
Net rental expenses:	\$
Gas/Oil/Heating:	\$
Car payments:	\$
Personal loans:	\$
Other:	\$

Cable/Satellite:	\$
Cell phones:	\$
Child care:	\$
Electric:	\$
Fuel/Maintenance:	\$
HOA/Condo fees/Property maintenance:	\$
Groceries:	\$
Phone:	\$
Trash:	\$
Water:	\$
Medical expenses:	\$
Auto insurance:	\$

Total debt/expenses: \$



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Acknowledgement and agreement

In making this request for consideration under KeyBank's Short Sale Program, I/we the undersigned certify under penalty of perjury:

1. That all of the information in this document is truthful and the event(s) identified on page 1 is/are the reason that I need to request a modification of the terms of my mortgage loan, short sale or deed-in-lieu of foreclosure.
2. I understand that the Servicer or their agents may investigate the accuracy of my statements, and may require me to provide supporting documentation. I also understand that knowingly submitting false information may violate Federal law.
3. I understand that if I have intentionally defaulted on my existing mortgage, engaged in fraud or misrepresented any fact(s) in connection with this document, the Servicer may cancel any Agreement under KeyBank's Short Sale program and may pursue foreclosure on my home.

Borrower signature

Date

Co-Borrower signature

Date



FAX cover sheet

Date:

Number of pages including cover sheet:

To:

KeyBank Short Sale Requests

Address: 4910 Tiedeman Road • Brooklyn, Ohio
44144 MailCode: OH-01-51-0622

Phone: 1-866-325-4765

FAX: 216-370-5819

[Email: loss_mitigation@keybank.com](mailto:loss_mitigation@keybank.com)

From:
