

REQUEST FOR LOAN ASSISTANCE FORM (NON-MORTGAGE)

Completing this form will help us understand your current situation.

Member Number: _____

1. Tell us about you

BORROWER		ADDITIONAL BORROWER	
Borrower's Name		Borrower's Name	
Social Security number		Social Security number	
Date of birth		Date of birth	
Mobile or daytime number with area code ¹		Mobile or daytime number with area code ¹	
Preferred contact method	<input type="checkbox"/> Voice <input type="checkbox"/> Email	Preferred contact method	<input type="checkbox"/> Voice <input type="checkbox"/> Email
Email Address		Email Address	

¹By providing your mobile phone number(s), you are giving TruWest Credit Union and companies working on its behalf permission to contact you at this number about all your TruWest Credit Union accounts. Your consent permits the use of text messaging, artificial or prerecorded voice messages and automatic dialing technology for informational or account servicing purposes, but not for telemarketing or sales. Message and data rates may apply. You may contact us anytime to change these preferences.

2. Describe your situation

HARDSHIP AFFIDAVIT	
Describe your hardship:	_____

Date situation began: _____ / _____ / _____	I believe my situation is: <input type="checkbox"/> Temporary <input type="checkbox"/> Long term

Check all boxes that explain your situation:

- Disaster (natural, i.e. flood, or man-made, including COVID-19) adversely affecting the collateral or Borrower’s place of employment
- Unemployment
- Unemployment start date: _____
- Excessive obligations
- Income reduction/underemployment
- Payment increase
- Divorce or legal separation; separation of Borrowers unrelated by marriage, civil union or similar domestic partnership under applicable law
- Death of a Borrower, or death of either the primary or additional wage earner in the household or a dependent family member
- Long-term or permanent disability; serious illness of a Borrower, additional Borrower or a dependent family member
- Distant employment transfer
- Business failure
- Other (please explain): _____

We need the following documents that apply to process your request for assistance review:

All Borrowers:

- A completed, signed, and dated Loan Assistance Form from all obligated parties.
- Most recent one (1) full month of paystubs; minimum of two consecutive paystubs for new employment.
- Most recent bank statement from all accounts, with all pages, for each borrower.
- Signed and dated federal tax return(s), with all schedules, for the most recent calendar year (if not required to file taxes, provide a signed and dated letter of explanation).

Additional documents for other sources of income:

If you are Self-Employed:

- Signed and dated tax return(s), with all schedules and forms, for the most recent calendar year (1040s, and if Corporation or LLC, include 1120s, K-1s, and/or 1065s).
- Last three (3) months or most recent quarterly, signed and dated.
- Profit and Loss Statement (last three (3) months business bank statements for the same period reflected on the Profit and Loss Statement).

If you receive Fixed Income (e.g. SSI, pension, long term disability, alimony, child support):

- Award letter or benefit statement showing the amount, frequency, and duration of pay.
- Most recent bank statement, with all pages, to verify deposits.

You aren't required to disclose child support, alimony or separation maintenance income or supporting documents unless you want us to consider it as qualifying income.

If you receive Variable Income (e.g. seasonal income, school employees):

- Evidence of the frequency and duration of pay, and documentation to support income received (e.g. Employment Contract, Letter of Explanation from Employer, along with paystubs and/or bank statements for the months worked).

If you are reapplying due to a change in your circumstances:

- A signed and dated letter of explanation and supporting documentation to outline your change in circumstance.

Note: Any expenses disclosed must be validated with supporting documents (e.g. Alimony, Child Support, Liens, and Judgments).

If you have any questions or concerns regarding this checklist, please contact our office at (602) 629-1920 or 1 (833) 932-1853, Monday-Friday, 8:00 AM – 5:00 PM (MST).

3. Help us determine your options

MONTHLY HOUSEHOLD INCOME		
	Borrower	Additional Borrower
WAGE: Employer 1 name: _____ Start date: ____/____/____ If you work seasonally or in the education field, how many months per year are you paid: _____	\$ _____	\$ _____
WAGE: Employer 2 name: _____ Start date: ____/____/____ If you work seasonally or in the education field, how many months per year are you paid: _____	\$ _____	\$ _____
Self-employment income: (Includes 1099 income) Percentage of business ownership: _____%	\$ _____	\$ _____
Benefits Income: Social Security benefits, investments, pensions or other retirement benefits Please specify: _____	\$ _____	\$ _____
Income: Child support/alimony/separation maintenance <i>You are not required to disclose child support, alimony or separation maintenance income unless you want us to consider it as qualifying income.</i>	\$ _____	\$ _____
Gross rents/boarder rents received (Primary recipient)	\$ _____	\$ _____
Unemployment Income Start Date _____ End Date _____	\$ _____	\$ _____
Food stamps/welfare (Primary recipient)	\$ _____	\$ _____
Tips, commissions, bonuses, overtime pay, pensions, Social Security income and annuities	\$ _____	\$ _____
Other (please specify): _____	\$ _____	\$ _____

TOTAL MONTHLY INCOME

\$ _____	\$ _____
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ADDITIONAL REQUIRED INFORMATION

MONTHLY LIVING EXPENSES		
Expense	Borrower	Additional Borrower
Food <i>(required field)</i>	\$ _____	\$ _____
Utilities <i>(required field)</i>	\$ _____	\$ _____
Automobile <i>(required field)</i> (insurance, maintenance, gas) <input type="checkbox"/> No automobile	\$ _____	\$ _____
Life insurance premium	\$ _____	\$ _____
Clothing	\$ _____	\$ _____
Cable, internet, phone	\$ _____	\$ _____
Medical	\$ _____	\$ _____
Tuition/school	\$ _____	\$ _____
Child care (daycare, babysitting)	\$ _____	\$ _____
Child support/alimony	\$ _____	\$ _____
Charitable contributions	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____
Total monthly living expenses	\$ _____	\$ _____

HOUSEHOLD ASSETS	
<i>Please provide the most recent statement for each account listed</i>	
Do you have an existing asset accounts as listed below?	<input type="checkbox"/> Yes If Yes, please complete this section excluding Retirement Funds. <input type="checkbox"/> No
Checking account #1 Bank name: _____	\$ _____
Checking account #2 Bank name: _____	\$ _____
Savings/money market #1 Bank name: _____	\$ _____
Savings/money market #2 Bank name: _____	\$ _____
CDs	\$ _____
Stocks/bonds	\$ _____
Other cash on hand	\$ _____
Other savings and/or investment accounts (please specify) _____	\$ _____
Total assets	\$ _____

4. Read and sign

ACKNOWLEDGMENT AND AGREEMENT

In making this request for consideration, I certify under penalty of perjury that I understand and agree that:

1. TruWest Credit Union (“TruWest”) may pull a current credit report for all Borrowers obligated on the loan.
2. If my liability for the debt was discharged in a Chapter 7 bankruptcy proceeding after I signed the loan documents, or if I am entitled to the protections of any automatic stay in bankruptcy, TruWest is providing information about this assistance program at my request and for informational purposes, and not as an attempt to impose personal liability for the debt.
3. If I am eligible for assistance, and I accept and agree to all the terms of an assistance plan, I also agree the terms of this Acknowledgment and Agreement are incorporated into that plan, however documented.
4. I understand that the financial information provided herein will be used by TruWest to analyze my options with respect to my loan. I further understand and acknowledge that any action taken by TruWest on my behalf will be in strict reliance on the financial information I am providing herein. I therefor agree that, if it is determined that the financial information I have provided contained information which was misrepresented by me and thereby caused actions to be taken which would not have been taken had the true fact and circumstances been known, I shall be liable for any or all losses, claims, or damages suffered by TruWest.
5. All information in this document is true, and the hardships listed herein and above in the “Describe your Situation” section explain why I’m requesting debt assistance.
6. TruWest or its agents may investigate the accuracy of my statements and I may need to provide additional documentation.
7. TruWest may directly obtain copies of account statements, including, but not limited to, checking and savings accounts, certificates of deposit (even if held for an extended period of time), mutual funds, money market funds, stocks or bonds, on accounts that are held by TruWest, its subsidiaries and affiliates for the review of my request for debt assistance.
8. The collateral I am requesting assistance on is in good, working condition, and currently insured.
9. TruWest will use the information I provide to determine my eligibility for assistance, but isn’t obligated to offer or grant me assistance. Furthermore, TruWest is not obligated to offer or grant me assistance based solely on the statements in this or any other document I send as part of this request.
10. If I have intentionally defaulted on my existing loan or engaged in fraud, or if any of the information I’ve provided is false, I may be ineligible for assistance under applicable investor/insurer programs or guidelines. This includes ineligibility now and for any future benefits and incentives that would otherwise have been available. I also understand that TruWest may recover any benefits or incentives I’ve previously received.
11. If I, or someone on my behalf, have submitted a Fair Debt Collection Practices Act cease and desist notice to TruWest or its agent, I withdraw that notice and understand that TruWest must contact me throughout the assistance process.
12. I consent to being contacted about this request for loan assistance at any email address I have provided.
13. All covenants, agreements, stipulations, and conditions in the note, loan agreement, and security instrument for the subject loan remain in full force and effect.

**By signing this document, I/we certify that all the information is true, accurate, and correct.
I/We understand that knowingly submitting false information may constitute fraud.**

Borrower Signature: _____ Date: ____/____/____

Additional Borrower Signature: _____ Date: ____/____/____

5. Send your documents

When we receive this form and all required documents, we'll assign a team of dedicated specialists to your loan who will call you within five business days to talk about your next steps.

HERE'S HOW YOU CAN SEND YOUR INFORMATION	
<p>For inquiries related to loan assistance please email us at : LoanAssistance@truwest.org</p> <p>For document and form submissions, please only send by secure email in response to our Acknowledgment email or by mail. Acknowledgment emails are sent directly to you and provided the link to this form.</p>	<p>Mail: TruWest Credit Union 1667 N Priest Dr Tempe, AZ 85281</p>
<p>After you have submitted your documentation, please call us at (602) 629-1920 or 1 (833) 932-1853, Monday-Friday, 8:00 AM – 5:00 PM (MST) to let us know.</p>	

For additional forms, please visit truwest.org/cloan-assistance.