

M&T Mortgage Corporation
One Fountain Plaza
6th Floor, attn: Loss Mitigation
Buffalo, New York 14203

M&T Mortgage Corporation is concerned about the difficulties you are experiencing in making timely payments. You should be aware that there may be options available to you when your mortgage is delinquent as a result of financial hardship.

Following is a financial package regarding your loan, If you are interested in seeking an alternative to foreclosure, please return the completed financial summary form to us at the above address along with a copy of the following:

1. most recent (2) years tax returns
2. letter stating your delinquency situation and the nature of your hardship
3. most recent (2) pay stubs

After M&T Mortgage has reviewed the completed information, they will contact you to discuss your financial situation and explain the various programs, which may be available to you.

Please be advised that all collection and foreclosure efforts will continue uninterrupted during the evaluation of your package. This notice is sent in an attempt to collect a debt. Information obtained will be used for that purpose.

If you have any questions, please contact our office at 1-800-724-1633 for the Loss Mitigation department.

M&T Mortgage Corporation

A SUBSIDIARY OF MANUFACTURERS AND TRADERS TRUST COMPANY

LOAN# _____

BORROWER FINANCIAL STATEMENT					
BORROWER'S NAME			Co-borrower's name		
SOCIAL SECURITY #	HOME PHONE#	WORK PHONE#	SOCIAL SECURITY #	HOME PHONE#	WORK PHONE#
MAILING ADDRESS			PROPERTY ADDRESS		
Do you occupy the property? Yes No	Is the property a rental? Yes No	If so, what is the monthly rental income?	Is the property listed for sale?	If so, with whom?	
REAL ESTATE AGENT'S NAME			CREDIT COUNSELING REPRESENTATIVE:		
REAL ESTATE AGENT'S PHONE:			CREDIT COUNSELING REPR'S PHONE:		
Have you contacted a credit counseling service for help? Yes No	Do you pay Real Estate Taxes? (outside of mortgage payments) Yes No		Are the taxes Current? Yes No		
Have you filed Bankruptcy? Yes No	If Yes, Chapter 7 Chapter 13	Filing Date:	ATTORNEY'S NAME ATTORNEY'S PHONE:	Are there other liens on the property? Yes No	
EMPLOYMENT					
EMPLOYER – BORROWER		HOW LONG?	EMPLOYER – CO-BORROWER		HOW LONG?
Monthly Income – Borrower			Monthly Income – Co-Borrower		
Wages	\$		Wages	\$	
Unemployment Income	\$		Unemployment Income	\$	
Child Support/Alimony	\$		Child Support/Alimony	\$	
Disability Income	\$		Disability Income	\$	
Less; Federal and State Tax, FICA	\$		Less; Federal and State Tax, FICA	\$	
Less, Other Deductions (401K etc)	\$		Less, Other Deductions (401K etc)	\$	
Total	\$		Total	\$	
Monthly Expenses (All Borrowers)			Assets & Liabilities (All Borrowers)		
Other Mortgages / Liens / Rents	\$		Type	Estimated Value / Amount Owed:	
Auto Loans (s)	\$		Checking Account(s)	\$	/
Auto Expenses / Insurance	\$		Saving / Money Market	\$	/
Credit Cards / Installment Loans	\$		Stocks / Bonds / CD's	\$	/
Health Insurance	\$		IRA / Keogh Accounts	\$	/
Medical	\$		401K / ESOP Accounts	\$	/
Child Care / Support / Alimony	\$		Home	\$	/
Food / Spending Money	\$		Other Real Estate	\$	/
Water / Sewer / Utilities / Phone	\$		Cars	#	\$ /
Other	\$		Other	#	\$ /
Total	\$		Total	\$	

- Notice: Alimony, child support, or separate maintenance income need not be revealed if the Borrower or Co-Borrower does not chose to have it considered for repaying this loan
- I agree as follows: My lender may discuss, obtain, and share information about my mortgage and financial situation with third parties regarding a possible alternative to foreclosure. Negotiations for a possible foreclosure alternative will not constitute a waiver of or defense to my lenders 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,

Submitted this _____ day of _____

By

_____ Date _____

Signature of Borrower

By

_____ Date _____

Signature of Co-Borrower

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SECOND LIEN INFORMATION

Date: _____

Borrower Name: _____

Loan Number: _____

Lien Holder's Name: _____

Lien Holder's Address: _____

Lien Holder's Phone: _____

Amount of Lien: _____

Comments/Conversations with lien holder:

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LETTER OF HARDSHIP

M&T Loan #: _____ ADDRESS: _____

I, _____ am requesting that M&T Mortgage Corporation review my financial situation to see if I qualify for any workout option.

I am having problems making my monthly payment because of financial difficulties created by:

- | | | |
|---|---|---|
| <input type="checkbox"/> Unemployment | <input type="checkbox"/> Reduced Income | <input type="checkbox"/> Divorce |
| <input type="checkbox"/> Separation | <input type="checkbox"/> Medical Bills | <input type="checkbox"/> Too Much Debt |
| <input type="checkbox"/> Death of Spouse | <input type="checkbox"/> Business Failure | <input type="checkbox"/> Incarceration |
| <input type="checkbox"/> Job Relocation | <input type="checkbox"/> Illness | <input type="checkbox"/> Payment Increase |
| <input type="checkbox"/> Military Service | <input type="checkbox"/> Property Damage | |

Other (Please Specify), _____

Explain Hardship: _____

I believe my situation is: Temporary Permanent

I would like to apply for:

- | | | |
|--------------------------------------|---------------------------------------|---------------------------------------|
| <input type="checkbox"/> Short Sale | <input type="checkbox"/> Deed-in-Lieu | <input type="checkbox"/> Payment Plan |
| <input type="checkbox"/> Forbearance | <input type="checkbox"/> Modification | |

There are are no additional lien/judgments on this property. If so, Please name the person, company or firm who holds the lien or judgment.

Lien Holder's name

Sincerely,

Borrower's Signature

Co-Borrower's Signature