

Short Sale Request Form

As a professional in the real estate industry, it is important for me to know as much as possible about you, your family, and your particular situation. Please fill out this questionnaire in as much detail as possible in order for me to help you in the sale of your property.

1. Name (First and Last): _____
2. Contact Emailed Address: _____
3. Contact Phone Number: _____
4. List All Borrowers on the Loan: _____

5. 1st Bank's Name: _____
Is this a FHA or VA Loan? Yes No
If Yes, which? FHA VA
What is your approximate Loan Balance? _____
When was your last payment? _____
How much is your payment? _____
6. 2nd Bank's Name (if applicable): _____
What is your approximate Loan Balance? _____
When was your last payment? _____
How much is your payment? _____
7. 3rd Bank's Name (if applicable): _____
What is your approximate Loan Balance? _____
When was your last payment? _____
How much is your payment? _____
8. Do you have Mortgage Insurance? Yes No
9. Are you current on your HOA payment (if applicable)? Yes No
10. Are you current on other related housing expenses (Sewer, Water, Trash, etc.)? Yes No
11. Have you recently spoken with your bank(s) regarding your options? Yes No
12. Have you spoken to another real estate agent regarding a short sale? Yes No

Complete this Form and Fax to (702) 946-1443 or Email to Info@ForeclosureSolutionsVegasValley.com

Kristine Dugan, ABR, BS, CRS, CSP, SFR • Shuman Mulcahy Group Realty
www.ForeclosureSolutionsVegasValley.com • (702) 967-0461

13. Why are you considering a Short Sale?

- | | | |
|---|--|--|
| <input type="checkbox"/> Unemployment | <input type="checkbox"/> Excessive Use of Credit | <input type="checkbox"/> Reduction of Income |
| <input type="checkbox"/> Payment Adjustment | <input type="checkbox"/> Illness of Borrower | <input type="checkbox"/> Illness in Family |
| <input type="checkbox"/> Death in Family | <input type="checkbox"/> Marital Difference | <input type="checkbox"/> Loss of Tenant |
| <input type="checkbox"/> Other (explain): _____ | | |
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14. Is this your primary residence? Yes No

15. Are you currently living in the property? Yes No

16. Are you opening your mail? Yes No

17. Have you received your Notice of Default from your lender which is usually mailed through certified mail? Yes No

If Yes, approximately what date did you receive it? _____

18. Have you heard of the Mediation Program? Yes No

19. Have you attempted to do a loan modification with your lender(s)? Yes No

20. Are you interested in the HAMP or HAFA Program? Yes No

21. Have you considered filing Bankruptcy? Yes No

22. Have you consulted with an Attorney? Yes No

If **yes**, please provide their name, company and contact number below:

Name: _____ Company: _____

Contact Information: _____

If **no**, would you like a referral to an Attorney? Yes No

23. Have you consulted with a CPA? Yes No

If **yes**, please provide their name, company and contact number below:

Name: _____ Company: _____

Contact Information: _____

If **no**, would you like a referral to a CPA? Yes No

24. Have you completed a Profit/Loss Statement (If No, see Attached)? Yes No

25. Additional Comments? _____

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