



LOSS MIT SERVICES

860-265-3727 Fax 888-977-1146

1 Hartfield Blvd Suite 204

East Windsor, CT 06088

Loss Mitigation and Debt Negotiation Services Agreement

This agreement is for Loss Mitigation and Debt Negotiation Services pertaining to the real estate located at: _____ and entered into on this date _____ by and between (Client) _____ Owner of the property and Accredited Home Services, LLC dba Loss Mit Services (LMS in body of contract) 8 Enfield Garden Dr Enfield, CT 06082.

Services; Check One

1. [] Short Sales LMS has reviewed the Client's mortgage statements and current Financial Statement. Subject to the terms and conditions of this Agreement LMS agrees to provide Short Sale Negotiation Services for the Property listed above, including but not limited to (a) Compiling of the lenders required short sale documentation such as: Estimated HUD-1 settlement statement, Hardship letter, financial statement, tax returns, pay stubs and bank statements (b) Faxing or mailing of the short sale package to the lender(s) (c) All negotiations regarding the purchase price, closing costs, and any possible deficiency or required promissory note (d) Coordination with the real estate agent for the lender's required Broker's Price Opinion (BPO) or appraisal (e) Forwarding to the real estate agent and closing agent of the short sale approval letter, closing instructions and approved estimated HUD-1.

Result to be Achieved; LMS shall use it's best efforts to procurr a short sale approval on the Client's property listed above. There is no gurantee that the Client's lender will accept a short sale on the Client's property. Factors such as the current value of the property, the offer price, the Lender & Investor Guidelines and the Client's Hardship and Current Finances among other factors are reviewed by the Lender(s) when reviewing a short sale offer. The Lender has the final decision.

Individualized Evaluation;

Based on your information, we believe it may be possible to negotiate a short sale with your lender. It will take further investigation and authorization on file with your lender to expand further.

[] Loan Modifications LMS has reviewed the Client's mortgage statements and current Financial Statement. Subject to the terms and conditions of this Agreement LMS agrees to

provide Loan Modification Services to the Client, including but not limited to (a) Compiling of the lenders required Loan Modification documentation such as: Hardship letter, financial statement, tax returns, pay stubs and bank statements (b) Faxing or mailing of the Loan Modification package to the lender(s) (c) All negotiations regarding terms of the requested modification to the Client's mortgage (d) Coordination of any lender required Broker's Price Opinion (BPO) or appraisal. (e) Forwarding of any approval or counteroffers from the Lender to the Client for final approval.

Result to be Achieved; LMS shall use its best efforts to procure a Loan Modification on the Client's mortgage. There is no guarantee that the Client's lender will agree to a Loan Modification of the Client's mortgage. Factors such as the current value of the property, the Lender & Investor Guidelines and the Client's Hardship and Current Finances among other factors are reviewed by the Lender(s) when reviewing a Loan Modification. The Lender has the final decision.

Individualized Evaluation;

2. Payment and Terms The fee for Loan Modification services is \$500 and is due upon receipt in writing of an accepted Loan Modification by the Client's lender. There is no fee for short sale negotiations to the Client. LMS will seek payment from one or more of the following; The lender(s), the closing attorney, the real estate agents, the buyer.

3. Disclosures

- (a) The Client understands that LMS will attempt to negotiate a short sale or loan modification with the lien-holder(s) on the property and that LMS has not made any promises guarantees or representations about its ability to successfully complete this task.
- (b) The Client understands fully and completely that if the property is facing foreclosure and LMS is not able to negotiate discounted payoffs or a loan modification with the lien-holders, the lien-holders may proceed with foreclosure.
- (c) The Client understands that the lender(s) are not under any obligation to approve a short sale or loan modification. The lender(s) will make their own final decision.
- (d) The Client understands that a short sale may result in a deficiency balance that the lien-holders can choose to pursue or charge off, at which time the sellers will receive an IRS form 1099 which may result in a taxable event. Client understands that they will need to seek advice from a certified tax professional. Client understands that the lender may require terms such as a promissory note, or require the Client to contribute money at closing, as a requirement of a short sale approval. Client will have the final decision and should review the approval with legal counsel at or before closing.
- (e) The Client understands that a short sale may have a negative impact on the Client's credit score.

(f) The Client understands that LMS is not acting on the Clients' behalf as an attorney, accountant, counselor, advisor, consultant, or non-profit agency.

This agreement contains the entire agreement of the parties, and there are no other promises or conditions in any other agreement whether oral or written.

This agreement shall be governed by the laws of the State of _____.

IMPORTANT NOTICE: You may stop doing business with us at any time. You may accept or reject the offer of mortgage assistance we obtain from your lender [or servicer]. If you reject the offer, you do not have to pay us. If you accept the offer, you will have to pay us \$0.00 for our short sale services (we will collect payment from other 3rd parties such as your real estate agent or closing attorney) or \$500 for our loan modification services. Loss Mit Services is not associated with the government, and our service is not approved by the government or your lender. Even if you accept this offer and use our service, your lender may not agree to change your loan. If you stop paying your mortgage, you could lose your home and damage your credit rating.

Debtor's three-day right to cancel

If you wish to cancel this contract, you may cancel by mailing a written notice by certified or registered mail to 1 Hartfield Blvd Suite 204 East Windsor, CT 06088. The notice shall state that you do not wish to be bound by this contract and must be delivered or mailed before midnight on the third business day after you sign this contract.

Signatures

You should read and understand this agreement. It is a legal and binding contract.

Client/Property Owner

Signature _____

Printed Name _____

Date _____

Client/Property Owner

Signature _____

Printed Name _____

Date _____

Loss Mit Services

Signature _____

Date _____

INCOME INFORMATION
Income information provided is *monthly*.

Description	Borrower 1	Borrower 2
Net Income	\$	\$
Overtime Pay	\$	\$
Commissions	\$	\$
Bonuses	\$	\$
Part-time Income	\$	\$
Alimony/Child Support	\$	\$
Rental Property Income	\$	\$
Social Security/Pension	\$	\$
Other	\$	\$
Other	\$	\$
TOTAL Monthly Net Income	\$	\$

ASSET INFORMATION

Description	Estimated Value	Amount Owed	Net Value
Home (circle type) FHA VA Conventional	\$	\$	\$
Other Home 2 FHA VA Conventional	\$	\$	\$
Automobile (1)	\$	\$	\$
Automobile (2)	\$	\$	\$
Automobile (3)	\$	\$	\$
Mobile Homes/Trailers/Boats	\$	\$	\$
Money in Checking and/or Savings Accounts	\$	\$	\$
Cash on Hand (cash, checks or money orders)	\$	\$	\$
401K/IRA/TSP/Keogh Account	\$	\$	\$
Other Stocks/Bonds/Certificates of Deposit	\$	\$	\$
Cash Value of Whole Life Insurance	\$	\$	\$
Other	\$	\$	\$
Other	\$	\$	\$
Other	\$	\$	\$
TOTAL	\$	\$	\$

Include assets for all borrowers listed on page 1.

Homeowner Signature Date
Homeowner Signature Date

EXPENSE INFORMATION

Include total of expenses for all borrowers listed on page 1.

Category	Description	Monthly Payment	Balance Due	Comments Number of Months Delinquent
Monthly Loan Payments	Mortgage Payment (subject property)	\$	\$	
	Other Mortgage Payments	\$	\$	
	Other Mortgage Payments	\$	\$	
	Real Estate Taxes & Homeowner Ins.	\$	\$	
	Homeowner's Assn./Condo Fees	\$	\$	
	Home Maintenance	\$	\$	
	Automobile (1)	\$	\$	
	Automobile (2)	\$	\$	
	Finance Company (1)	\$	\$	
	Finance Company (2)	\$	\$	
	Furniture Company	\$	\$	
Student Loans	\$	\$		
Credit Cards/ Revolving Debt	VISA	\$	\$	
	MasterCard	\$	\$	
	Other	\$	\$	
	Other	\$	\$	
	Other	\$	\$	
Utilities	Electricity/Gas	\$	\$	
	Heating Oil/Propane	\$	\$	
	Water/Sewer/Garbage	\$	\$	
	Telephone	\$	\$	
	Cellular Phone/Pager	\$	\$	
	Internet Access	\$	\$	
Insurance	Insurance (Health/Life)	\$	\$	
	Medical Bills (not covered by ins.)	\$	\$	
	Automobile Insurance	\$	\$	
Automobile/ Transportation	Gasoline	\$	\$	
	Maintenance	\$	\$	
	Parking/Tolls	\$	\$	
	Public Transportation/Car Pooling	\$	\$	
Household	Grocery	\$	\$	
	New Clothes/Dry Cleaning	\$	\$	
	Cable/Satellite TV	\$	\$	
	Home Security/Alarm System	\$	\$	
	Medicine/RX	\$	\$	
	Entertainment	\$	\$	
Miscellaneous Expenses	Day Care/Baby-Sitting	\$	\$	
	Alimony/Child Support	\$	\$	
	Education/Tuition/Book Expense	\$	\$	
	Liens/Judgments (IRS or other)	\$	\$	
	Other	\$	\$	
	Other	\$	\$	
	Other	\$	\$	
	Other	\$	\$	
TOTAL		\$	\$	

Homeowner Signature

Date

Homeowner Signature

Date

Authorization to Release Information

Lender: _____

Loan/Account Number#: _____

Property Address: _____

Third Party Information

Company: **Loss Mit Services**

Authorized Parties: **Sean Wilder, Anne-Marie Glogowski, Mary Van**

Authorized Parties: **Sandy Kenyon, Tina Trematerra, Michael Glogowski &
Tiffany Maxim**

Mailing Address: **54 Hazard Ave #309 Enfield, CT 06082**

Phone #: **860-265-3727** Fax #: **888-977-1146** Email: **Sean@CTLMS.com**

I/We hereby authorize you to release to the Third Party Listed Above or its agents, employees and assigns, any and all information that they may require about my loan/account for the above referenced property including but not limited to; Payoff & Reinstatement figures, Loan Modification or Short Sale Negotiations and any and all documentation in relation to the above. "Agents" shall include all Company employees, real estate agents, attorneys, and their assistants. You may reproduce this document to acquire reference from more than one source. This Authorization shall not expire unless revoked in writing by the borrower or authorized 3rd party.

Borrower 1

Borrower 2

Signature

Signature

Printed Name

Printed Name

Mailing Address

Mailing Address

City State Zip

City State Zip

Social Security Number

Social Security Number

Date Phone

Date Phone

Short Sale Questionnaire

Please complete as thoroughly and clearly/legibly as possible.

Property Address: _____

Who is your Realtor? _____ Email _____

Phone Number: _____ Brokerage _____

Are you related to your Real Estate Agent? YES ___ NO ___

If you do not have a realtor, would you like us to refer one with Short Sale experience to you? YES ___ NO ___

Seller #1: _____ Email: _____

Social Security Number: _____ - _____ - _____ Phone Number _____

Mailing address if different: _____

If you have a reverse mortgage we also need the borrower's Date of Birth _____

Seller #2: _____ Email: _____

Social Security Number: _____ - _____ - _____ Phone Number _____

Mailing address if different: _____

Seller #3: _____ Email: _____

Social Security Number: _____ - _____ - _____ Phone Number _____

Mailing address if different: _____

Is the homeowner or the homeowner's spouse active duty military or been under active duty status in the last 12 months? Yes ___ No ___

If Yes: Date last active duty ended Date: _____

Do you have any other Liens or Judgments? Yes ___ No ___

Mortgage Company #1: _____ Loan # _____

Mortgage Company #2: _____ Loan # _____

Mortgage Company #3: _____ Loan # _____

Other Liens or Judgments on Property: _____ \$ _____

Other Liens or Judgments on Property: _____ \$ _____

How many people in your household including yourself? _____

Is There a Home Owner's, Or Condo Association? Yes ___ No ___

If Yes: Amount of Monthly Dues \$ _____ Current? Yes ___ No ___

If No: Amount Delinquent \$ _____

Who do you pay condo fees to (contact info) _____

Services: Water, Sewer, Trash, Etc

Where Water Paid to? _____ Amount Delinquent \$ _____
Where Sewer Paid To? _____ Amount Delinquent \$ _____
Other Town Services _____ Amount Delinquent \$ _____
Do you own any other real estate: Yes _____ No _____

If Yes please explain

Was 1st Mortgage originated Prior to Jan 1 2009? Yes _____ No _____

Is property currently Owner-Occupied? Yes _____ No _____

If No: Was property ever Owner-Occupied? Yes _____ No _____

If Yes: Date of last occupancy by owner Date: _____

Is the property rented? Yes _____ No _____

Is the property Vacant? Yes _____ No _____

Are the utilities on? Yes _____ No _____

Have you ever filed Bankruptcy? Yes _____ No _____ Attorney: _____

If Yes: Are you currently in Bankruptcy? Yes _____ No _____

Date of Discharge _____

Was mortgage included? Yes _____ No _____

Were any other liens on the property included? Yes _____ No _____

If liens were included was an Order Avoiding Liens Recorded?

Yes _____ No _____

Are you planning to file Bankruptcy? Yes _____ No _____ When? _____

We prefer to refer you to an attorney we have already successfully closed short sales with when it is time to close. The cost for the attorney is paid from the sales price, not out of your pocket.

Do you already have your own Real Estate Attorney, with short sale experience, you would rather use? YES _____ NO _____ If not, would you like us to suggest one? YES _____ NO _____
Attorney's Contact Info:

Any other Notes you'd like us to know: