



Member No.

Financial Hardship Application – Loans

Required Documentation

- ☐ Completed PenFed Financial Hardship Application and PenFed Financial Statement
- ☐ Income Verification for *Wage-Earners* (last two paystubs and most recent tax return)
- ☐ Income Verification for *Self-Employed Borrowers* (last two year's tax returns with supporting schedules)
- ☐ Full Disclosure of All Monthly Obligations (including loan payments, utilities, child care, care insurance, etc.)
- ☐ Disclosure of All Liquid Assets

Members can submit their forms at their local branch or via the following channels:

Mail: Pentagon Federal Credit Union
2930 Eisenhower Avenue
Alexandria, VA 22314

Fax: 866-298-2635 (Fax) 703-633-7092 (Local Fax)

Email: info@hq.penfed.org

Note: Please continue to make your regularly scheduled loan payments while your application is processed and reviewed for consideration. The processing/review time-frame is usually 4-6 weeks' time.



Financial Hardship Application

Member No. _____

I. I am having problems making my monthly payment because of financial difficulties created by:
(Check all options that apply)

- | | | |
|---|---|---|
| <input type="checkbox"/> Military Service | <input type="checkbox"/> Business Failure | <input type="checkbox"/> Divorce/Separation |
| <input type="checkbox"/> Illness | <input type="checkbox"/> Death of Spouse | <input type="checkbox"/> Disability |
| <input type="checkbox"/> Reduced Income | <input type="checkbox"/> Unemployment | |
| <input type="checkbox"/> Medical Bills | <input type="checkbox"/> Job Relocations | |

Other (Please specify) _____

II. I believe that my current hardship is:

- ☐ Permanent ☐ Temporary, should be over by: _____

III. Please list all loans with Pentagon Federal Credit Union that you are requesting assistance for:

PenFed Loan Number: _____

Loan Type: (choose from the options below)

- | | |
|---|--|
| <input type="checkbox"/> Credit Card | <input type="checkbox"/> Equity Line of Credit |
| <input type="checkbox"/> Auto Loan | <input type="checkbox"/> Fixed Equity Loan |
| <input type="checkbox"/> Bill Consolidation/Personal Loan | |
| <input type="checkbox"/> Mortgage | |

Other (Please specify) _____

IV. Please include additional details regarding your hardship situation:

IT IS VERY IMPORTANT THAT YOU EXPLAIN YOUR FINANCIAL HARDSHIP

V. I certify that the statements and information provided above are true and complete.

Member Signature

Date



Member No. _____

BORROWER FINANCIAL STATEMENT

Borrower Name		Date of Birth	Co-Borrower Name		Date of Birth
Current Mailing Address			Current Mailing Address		
Current Property Address (if different from Mailing Address)			Current Property Address (if different from Mailing Address)		
Social Security No.	Home Phone #	Work Phone #	Social Security No.	Home Phone #	Work Phone #
E-mail Address:		Cell #	E-mail Address:		Cell #
Employer - Borrower		How Long?	Employer - Co-borrower		How Long?
Gross Monthly Income		\$	Gross Monthly Income		\$
Unemployment / Disability Income		\$	Unemployment / Disability Income		\$
Child Support / Alimony Received*		\$	Child Support / Alimony Received		\$
Rents Received		\$	Rents Received		\$
Other (specify)		\$	Other (specify)		\$
TOTAL:		\$	TOTAL:		\$

* Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

PROPERTY INFORMATION

Property Address (enter P if mortgage holder is PenFed, PS if pending sale or R if rental being held for income) ▼	Type of Property	Present Market Value	Amount of Mortgage	Gross Rental Income	Mortgage Payments	Insurance, Maintenance, Taxes & Misc.	Net Rental Income
Totals		\$	\$	\$	\$	\$	\$

Total number of persons living in the property? _____ Have you ever-filed bankruptcy? ☐ No ☐ Yes: Date _____

Are there any other liens or judgments against the property? ☐ No ☐ Yes, specify: _____

Are there any outstanding judgments against you or are you party to a lawsuit? ☐ No ☐ Yes, specify: _____

MONTHLY EXPENSES

ASSETS

Mortgage Payment / Rent (Please circle selection)	\$	Type	Estimated Value
Other Mortgage(s)	\$	Home	\$
Auto Loan(s)	\$	Other Real Estate #	\$
Installment Loans	\$	Checking	\$
Credit Cards	\$	Savings / Money Market	\$
Medical Bills	\$	Cars and Value #	\$
Child Support / Alimony Paid	\$	IRA / Keogh Account(s)	\$
Homeowner Association Fees / Dues (If not included in escrow or mortgage payment)	\$	401 K / ESOP Account(s)	\$
Utilities	\$	Stocks / Bonds	\$
Other (specify)	\$	Other (specify)	\$
TOTAL:	\$	TOTAL:	\$

I certify that all statements herein are true and complete. I acknowledge that Section 104 of Title 18 of the U.S. Code makes it a federal crime for anyone to make false statement or reports or willfully overvalue property or securities for the purpose of including or influencing the action of a federal credit union on an application for a loan, extension or renewal of the same, or for the acceptance, release, or substitution of collateral. I expressly authorize any person, partnership, credit reporting agency, association, firm, corporation, or personnel office or officer, upon your request, to furnish you a credit report or other information concerning me relevant to the review and evaluation of this application or any subsequent re-evaluation thereof.

BY: _____ DATE: _____ BY: _____ DATE: _____
Signature of Borrower Signature of Co-Borrower

Form 628 (6/13)