

CARES Act COVID-19 Mortgage Forbearance Request

Date: _____

Borrower's Information:

Name: _____

Phone (optional): _____

Email (optional): _____

Mailing Address:

To:

Name of Bank

Via (check all that apply):

Mail: _____

Email: _____

Fax: _____

CC:

Bank's Attorneys (if in foreclosure)

Via (check all that apply):

Mail: _____

Email: _____

Fax: _____

RE: Loan #: _____, **Property Address:** _____

Dear Bank Representative,

By this letter, I request a COVID-19 mortgage forbearance under the CARES Act. The COVID-19 pandemic has affected me in the following ways:

(Describe how COVID-19 has affected you, directly or indirectly (finances, health, etc.)

I want the forbearance to last _____ days.

(Specify length of requested forbearance, up to 180 days. This can be extended once, for an additional 180 days.)

Please confirm in writing that my loan is in forbearance and the length of the forbearance.

Thank you,

Borrower's Name