



We make home possibleSM

Multifamily Legal Referral Form

DO NOT REDUCE THIS FORM.

Seller/Service information

| | | | |
|-----------------------|--------|-----------------------|------------|
| Seller/Service's name | | Seller/Service number | |
| Address | | Contact person's name | |
| City, State, Zip | E-mail | Telephone number | Fax number |
| | | () | () |

Loan information

| | | |
|---------------------------|----------------------------|------------------|
| Freddie Mac loan number | Seller/Service loan number | |
| Borrower name | | |
| Address, City, State, Zip | E-mail | Telephone number |
| | | () |

Principals/Guarantors (Attach additional page, if necessary. Do not list post office boxes for addresses. Verify all contact information.)

| | | | | |
|----------------------------|---------------------------|-----------------------------------|------------------|--|
| Principal's name | Address, City, State, Zip | E-mail | Telephone number | Percentage of interest |
| | | | () | % |
| Principal's name | Address, City, State, Zip | E-mail | Telephone number | Percentage of interest |
| | | | () | % |
| Principal's name | Address, City, State, Zip | E-mail | Telephone number | Percentage of interest |
| | | | () | % |
| Guarantor's name | Address, City, State, Zip | E-mail | Telephone number | Percentage of interest |
| | | | () | % |
| Current management company | Address, City, State, Zip | Property manager's name | E-mail | Telephone number |
| | | | | () |
| Project's name | Address | Original loan amount | Interest rate | Current unpaid principal balance |
| | City, State, Zip | \$ | % | \$ |
| Note date | Purchase date | Due date of last paid installment | Maturity date | Default interest rate |
| | | | | % |
| | | | | Personal guaranty |
| | | | | <input type="checkbox"/> No <input type="checkbox"/> _____ % |

Assumption

| | |
|---|--------------------|
| Assumption | Date approved |
| <input type="checkbox"/> No <input type="checkbox"/> Yes; complete this section | |
| Original borrower | Last known address |
| | |
| | City, State, Zip |
| | |

Subordinate financing

| | | | |
|---|----------------------------------|--|----------------------|
| Subordinate financing | | | |
| <input type="checkbox"/> No <input type="checkbox"/> Yes; complete this section | | | |
| Original loan amount | Current unpaid principal balance | Approval date | Approved by |
| \$ | \$ | | |
| Date of last title report | Name of subordinate lienholder | | |
| | | | |
| Interest rate | Maturity date | Recourse | Monthly debt service |
| % | | <input type="checkbox"/> No <input type="checkbox"/> Yes | \$ |

Technical defaults

Unauthorized transfer

No Yes

Waste

No Yes

Unauthorized financing

No Yes

Other

No Yes, explain:

Bankruptcy

No Yes, date filed:

Arrearage information

Arrearages as of (date)

Due date of next installment

Monthly principal and interest

\$

Monthly escrow

Delinquent principal \$ _____

Delinquent interest \$ _____

Default interest \$ _____

Delinquent escrow (shortage) \$ _____

Escrow advances \$ _____

Late charges \$ _____

Other \$ _____; specify types and amounts: _____

Funds in suspense, if applicable (\$ _____)

TOTAL ARREARAGES \$ _____ for the months of _____

Tax \$ _____

Insurance \$ _____

Water and sewer \$ _____

Replacement reserves \$ _____

Other \$ _____

TOTAL \$ _____

Default summary

Expand on reason for default, summarize recent conversations with borrower, describe property condition, etc.

Reason for default:

Conversations with borrower:

Property condition:

Additional background:

I certify that this information is true and correct.

Authorized signature

Date

Name (printed or typed)

Title (printed or typed)