(Company's representative)  
(Company's Name)  
(Company's Address)  
(Company's phone number)  
  
RE: (Home Address)

Account Number:(#)

Dear (Ms/Mr. Brown:)  
  
I/We, (Your Name),are/am requesting that you review my/our financial state of affairs to see if I/we qualify for a loan workout option.

I/We are having problems making my/our monthly payments because of financial troubles created by (pick one):

Death of my spouse  
Divorce  
Job layoff  
Separation  
Medical bills  
Too much debt  
Unemployment  
Death of a family member  
Business failure  
Loss of income  
Job relocation  
Illness  
Damage to property  
Military service  
Payment increase  
Incarceration

Other (Please Specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This difficulty or situation happened on or about this date MM/DD/YYYY.  
  
I/We believe that my/our situation is (circle one) Temporary / Permanent  
  
The following is a brief account of my/our situation: (explain your situation and tell them why you feel you can now afford your new payments/payments)  
  
I/We, (your name), state the information provided above to be true and correct to the best of my/our knowledge.  
Borrower’s Signature  
  
Date  
  
Co-Borrower’s Signature  
  
Date