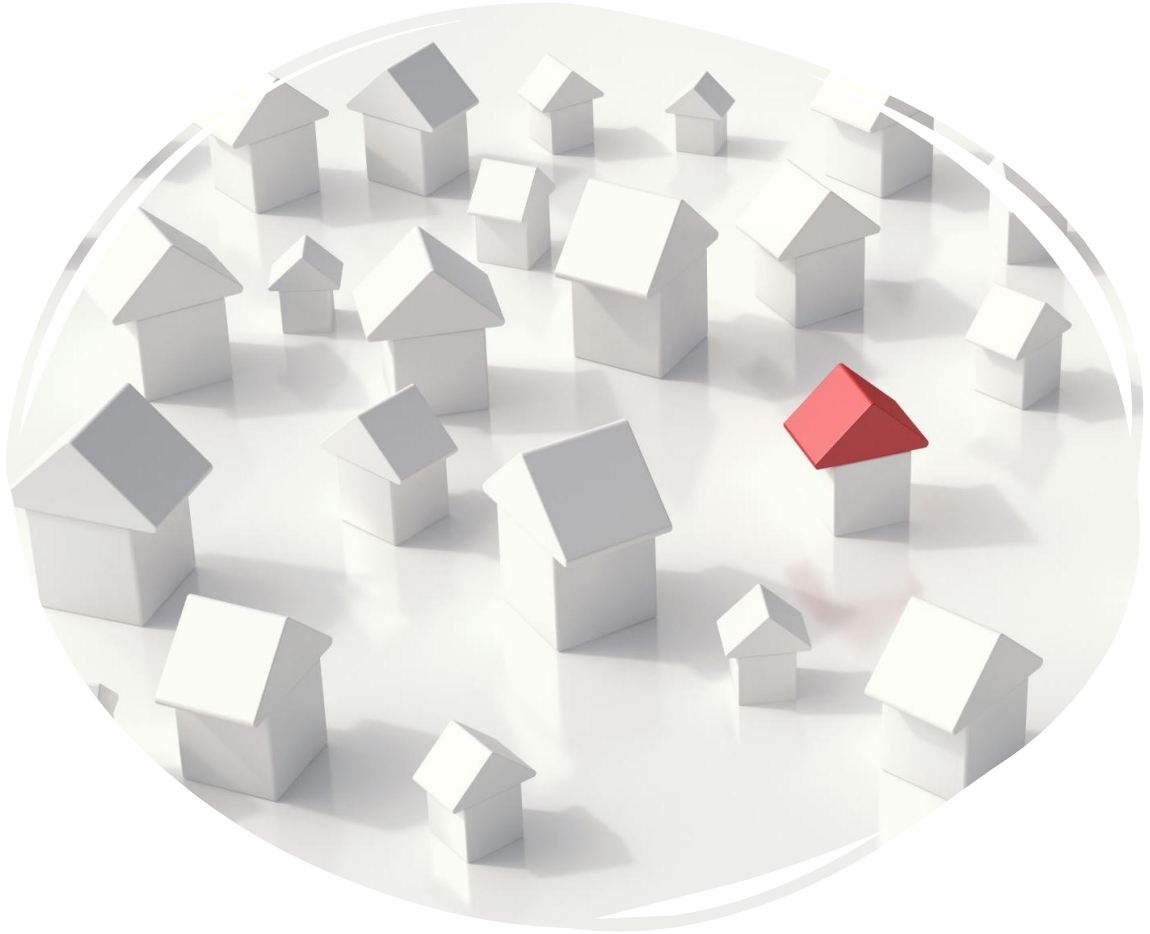
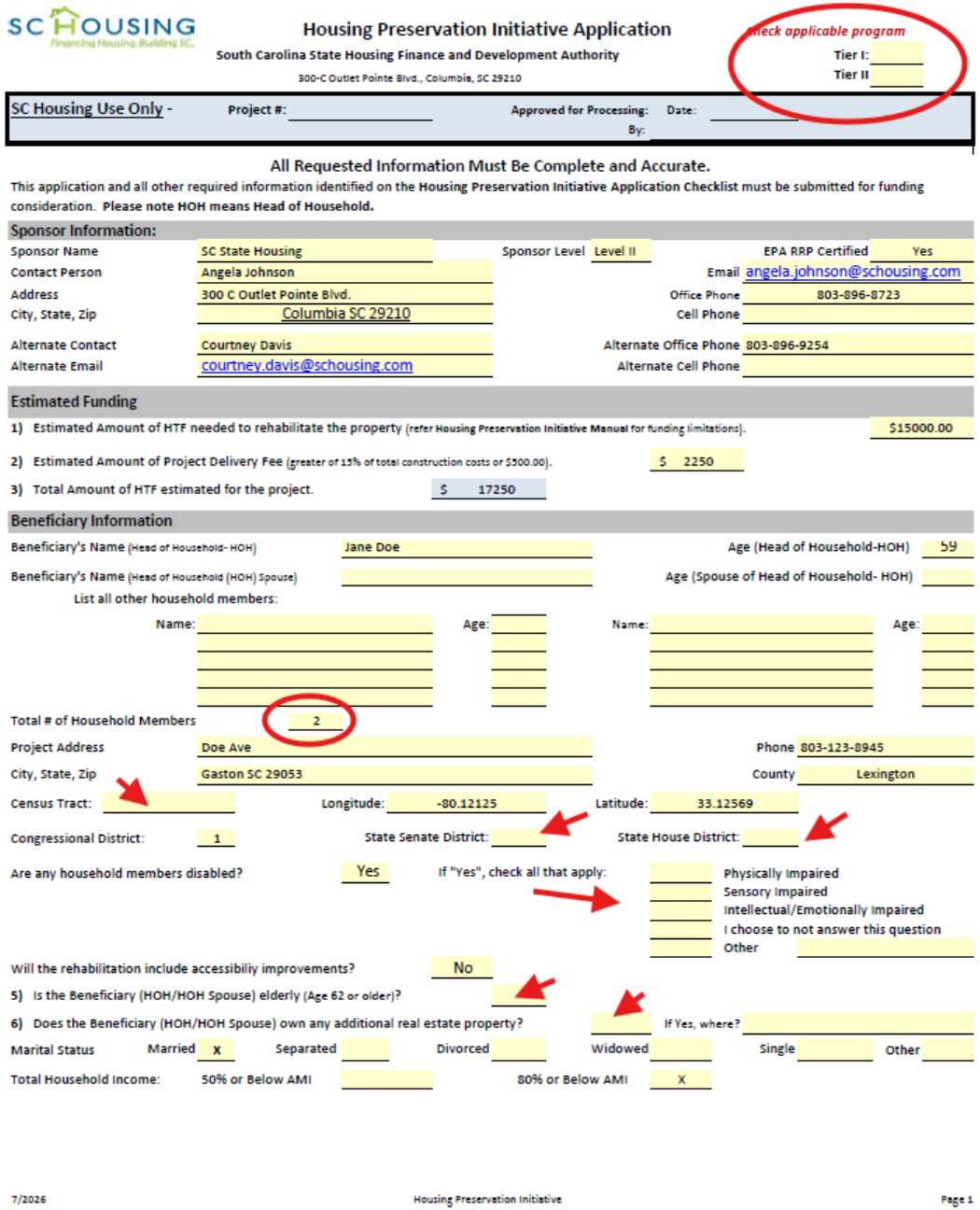


Housing Preservation Initiative (HPI)

Why Documentation Matters

An incomplete HPI submission



SC HOUSING
Financing Housing, Building SC.

Housing Preservation Initiative Application

South Carolina State Housing Finance and Development Authority
300-C Outlet Pointe Blvd., Columbia, SC 29210

Check applicable program
Tier I:
Tier II

SC Housing Use Only - Project #: Approved for Processing: Date: By:

All Requested Information Must Be Complete and Accurate.

This application and all other required information identified on the **Housing Preservation Initiative Application Checklist** must be submitted for funding consideration. **Please note HOH means Head of Household.**

Sponsor Information:

Sponsor Name	SC State Housing	Sponsor Level: Level II	EPA RRP Certified: Yes
Contact Person	Angela Johnson		Email: angela.johnson@schousing.com
Address	300 C Outlet Pointe Blvd.		Office Phone: 803-896-8723
City, State, Zip	Columbia SC 29210		Cell Phone:
Alternate Contact	Courtney Davis		Alternate Office Phone: 803-896-9254
Alternate Email	courtney.davis@schousing.com		Alternate Cell Phone:

Estimated Funding

1) Estimated Amount of HTF needed to rehabilitate the property (refer Housing Preservation Initiative Manual for funding limitations). $15000.00

2) Estimated Amount of Project Delivery Fee (greater of 15% of total construction costs or $500.00). $ 2250

3) Total Amount of HTF estimated for the project. $ 17250

Beneficiary Information

Beneficiary's Name (Head of Household- HOH): Jane Doe — Age (Head of Household-HOH): 59

Beneficiary's Name (Head of Household (HOH) Spouse): — Age (Spouse of Head of Household- HOH):

List all other household members:

Name:	Age:	Name:	Age:

Total # of Household Members: 2

Project Address: Doe Ave — Phone: 803-123-8945

City, State, Zip: Gaston SC 29053 — County: Lexington

Census Tract: — Longitude: -80.12125 — Latitude: 33.12569

Congressional District: 1 — State Senate District: — State House District:

Are any household members disabled? Yes — If "Yes", check all that apply:

- Physically Impaired
- Sensory Impaired
- Intellectual/Emotionally Impaired
- I choose to not answer this question
- Other

Will the rehabilitation include accessibiliy improvements? No

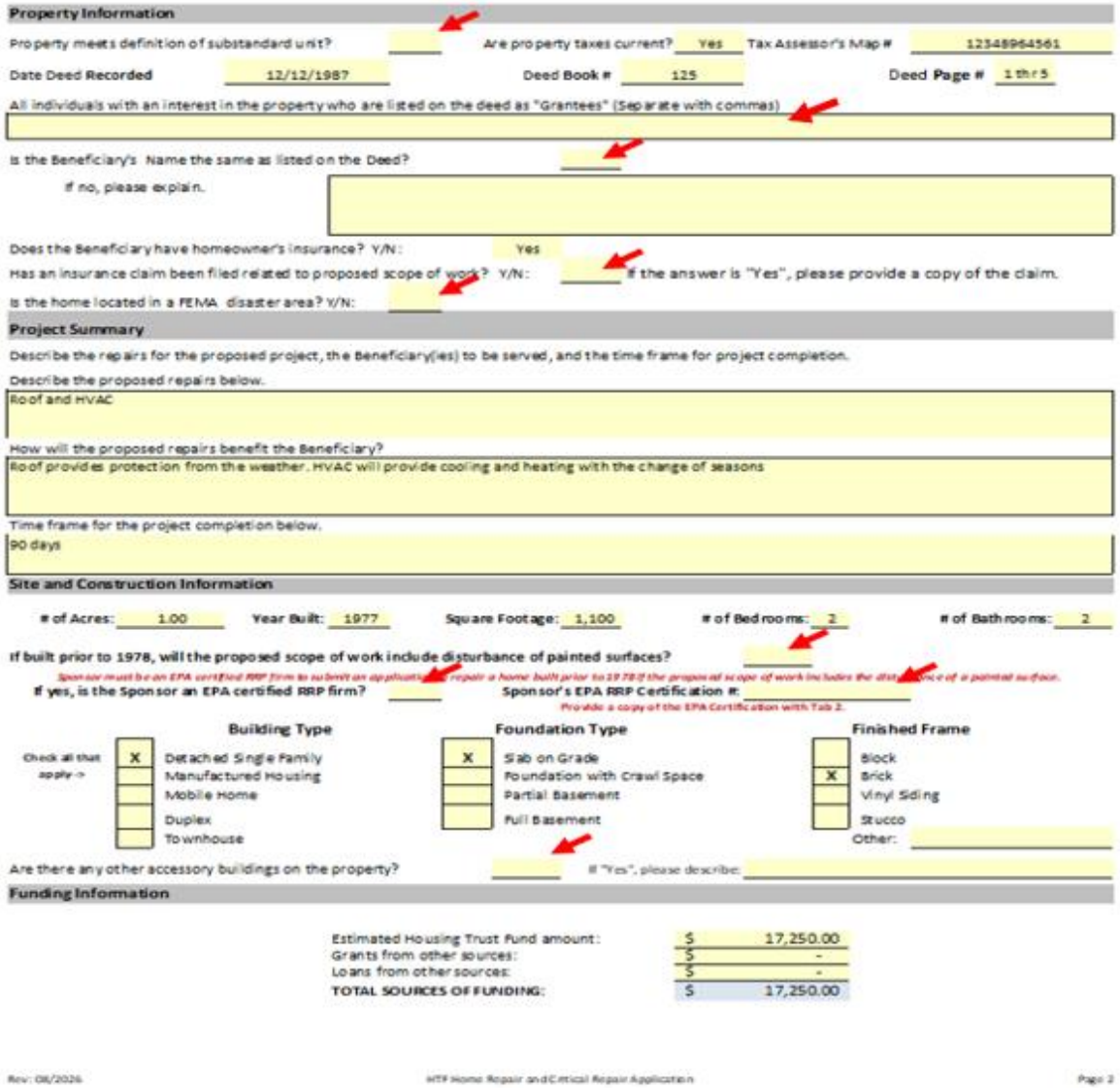
5) Is the Beneficiary (HOH/HOH Spouse) elderly (Age 62 or older)?

6) Does the Beneficiary (HOH/HOH Spouse) own any additional real estate property? — If Yes, where?

Marital Status: Married X — Separated — Divorced — Widowed — Single — Other

Total Household Income: 50% or Below AMI — 80% or Below AMI X

An incomplete HPI submission



Property Information

Property meets definition of substandard unit? ____ Are property taxes current? Yes Tax Assessor's Map # 12348964561

Date Deed Recorded 12/12/1987 Deed Book # 125 Deed Page # 1 thr 5

All individuals with an interest in the property who are listed on the deed as "Grantees" (Separate with commas)

Is the Beneficiary's Name the same as listed on the Deed? ____

If no, please explain.

Does the Beneficiary have homeowner's insurance? Y/N: Yes

Has an insurance claim been filed related to proposed scope of work? Y/N: ____ If the answer is "Yes", please provide a copy of the claim.

Is the home located in a FEMA disaster area? Y/N: ____

Project Summary

Describe the repairs for the proposed project, the Beneficiary(ies) to be served, and the time frame for project completion.

Describe the proposed repairs below.

Roof and HVAC

How will the proposed repairs benefit the Beneficiary?

Roof provides protection from the weather. HVAC will provide cooling and heating with the change of seasons

Time frame for the project completion below.

90 days

Site and Construction Information

# of Acres: 1.00 Year Built: 1977 Square Footage: 1,100 # of Bedrooms: 2 # of Bathrooms: 2

If built prior to 1978, will the proposed scope of work include disturbance of painted surfaces? ____

Sponsor must be an EPA certified RRP firm to submit an application to repair a home built prior to 1978 if the proposed scope of work includes the disturbance of a painted surface.

If yes, is the Sponsor an EPA certified RRP firm? ____ Sponsor's EPA RRP Certification #: ____

Provide a copy of the EPA Certification with Tab 2.

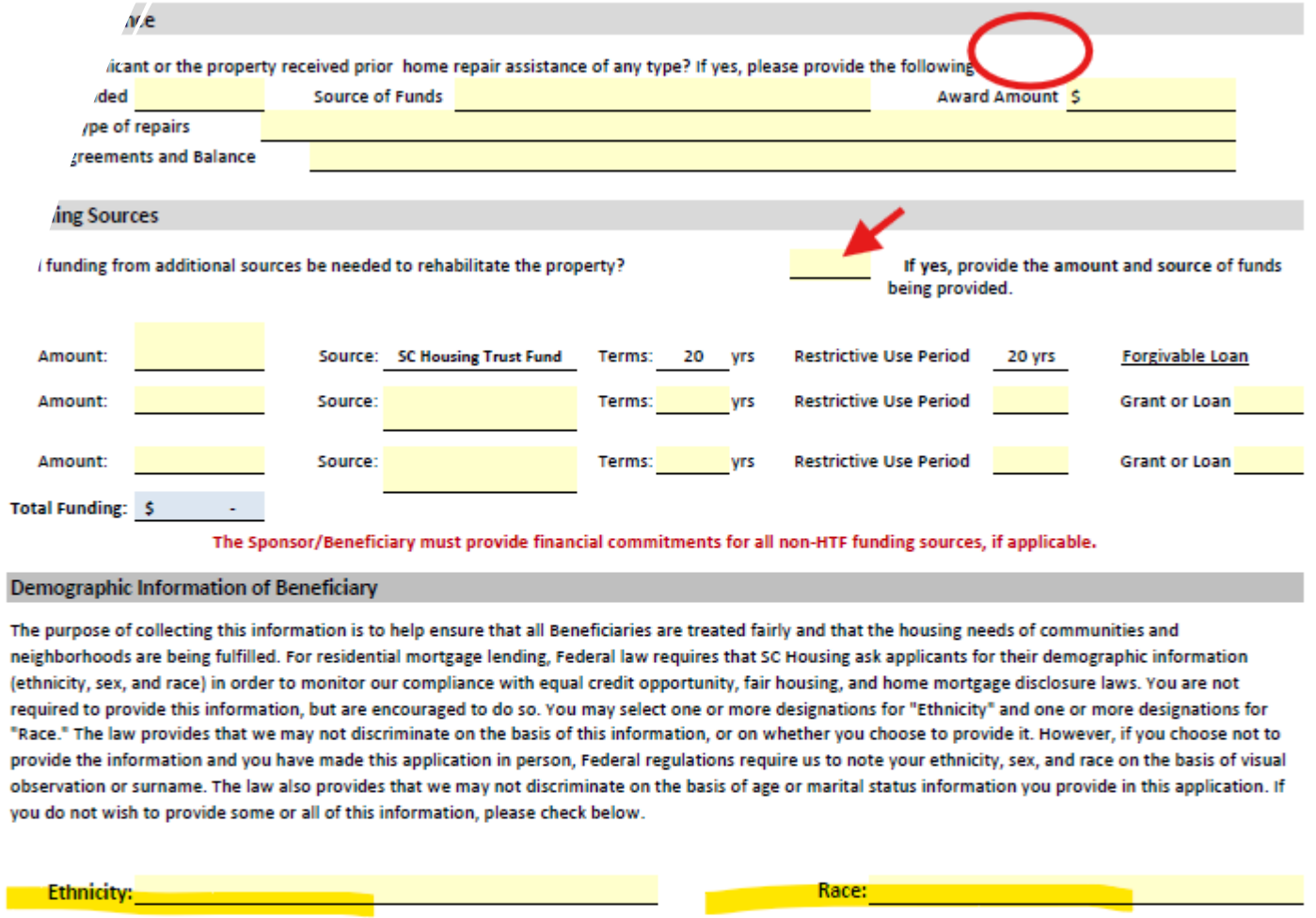
Check all that apply ->	Building Type	Foundation Type	Finished Frame
X	Detached Single Family	X Slab on Grade	Block
	Manufactured Housing	Foundation with Crawl Space	X Brick
	Mobile Home	Partial Basement	Vinyl Siding
	Duplex	Full Basement	Stucco
	Townhouse		Other:

Are there any other accessory buildings on the property? ____ If "Yes", please describe:

Funding Information

Estimated Housing Trust Fund amount:	$ 17,250.00
Grants from other sources:	$ -
Loans from other sources:	$ -
TOTAL SOURCES OF FUNDING:	$ 17,250.00

An incomplete HPI submission



...e

...icant or the property received prior home repair assistance of any type? If yes, please provide the following

...ded | Source of Funds | Award Amount $

...pe of repairs

...greements and Balance

...ing Sources

...funding from additional sources be needed to rehabilitate the property? If yes, provide the amount and source of funds being provided.

Amount:		Source:	SC Housing Trust Fund	Terms:	20	yrs	Restrictive Use Period	20 yrs	Forgivable Loan
Amount:		Source:		Terms:		yrs	Restrictive Use Period		Grant or Loan
Amount:		Source:		Terms:		yrs	Restrictive Use Period		Grant or Loan

Total Funding: $ -

The Sponsor/Beneficiary must provide financial commitments for all non-HTF funding sources, if applicable.

Demographic Information of Beneficiary

The purpose of collecting this information is to help ensure that all Beneficiaries are treated fairly and that the housing needs of communities and neighborhoods are being fulfilled. For residential mortgage lending, Federal law requires that SC Housing ask applicants for their demographic information (ethnicity, sex, and race) in order to monitor our compliance with equal credit opportunity, fair housing, and home mortgage disclosure laws. You are not required to provide this information, but are encouraged to do so. You may select one or more designations for "Ethnicity" and one or more designations for "Race." The law provides that we may not discriminate on the basis of this information, or on whether you choose to provide it. However, if you choose not to provide the information and you have made this application in person, Federal regulations require us to note your ethnicity, sex, and race on the basis of visual observation or surname. The law also provides that we may not discriminate on the basis of age or marital status information you provide in this application. If you do not wish to provide some or all of this information, please check below.

Ethnicity: Race:

An incomplete HPI submission

Acknowledgments

The Sponsor and Beneficiary certify that all information furnished in support of this application is true and complete to the best of the Sponsor's and Beneficiary's knowledge and belief. The Sponsor and Beneficiary understand and agree SC Housing has the right to conduct its own independent review and analysis of the application and all documents submitted with the application and may, in its sole discretion, require additional information or make adjustments to required documentation.

The Sponsor certifies it is in compliance with SC Housing programs in which it participates or has participated. Neither the Sponsor nor any of its officers, principals, advisors, consultants, or any other member of its organization is presently debarred or within the past five years has been debarred from participation in any federal program (including but not limited to: the U.S. Housing and Urban Development, the U.S. Internal Revenue Service and the U.S. Department of Agriculture) or any SC Housing program. The Sponsor certifies it is not delinquent on any financial obligation owed to SC Housing and neither it nor any of its officers or principals have been convicted of or are under investigation for civil or criminal fraud with respect to any of the Sponsor's activities.

The Sponsor and Beneficiary agree to abide by all South Carolina Housing Trust Fund Program rules and regulations. The Sponsor and Beneficiary understand and agree SC Housing may suspend or debar the Sponsor and its principals and/or its Beneficiaries from participation in the Housing Trust Fund or all SC Housing programs when SC Housing determines the Sponsor or Beneficiary has expended Housing Trust Fund monies inappropriately and/or has acted in a manner that SC Housing determines warrants suspension or debarment. If SC Housing has sufficient reason to believe an Sponsor or Beneficiary has violated federal, state, or local laws, SC Housing may request the assistance of law enforcement. SC Housing may assist law enforcement personnel in completing their investigation and with the prosecution of any criminal acts. SC Housing may also seek any available civil remedies in instances where there has been a misappropriation of Housing Trust Fund award proceeds.

The failure to abide by the procedures contained in the Housing Trust Fund Manuals and other program materials may result in SC Housing declining to accept an application. Further, the failure to abide by the program requirements will result in the disqualification of the Sponsor and all other persons or organizations involved with the Sponsor from further Housing Trust Fund participation. If proceeds subject to recapture are not repaid when requested, the mortgage will be foreclosed where notes and mortgages are used. When restrictive covenants are used, recapture may occur as defined within the Restrictive Covenants document.

The Sponsor and Beneficiary acknowledge and understand that submission of a complete application does not guarantee a Housing Trust Fund award.

Sponsor: _____ (Signature) Date: 8/17/2026

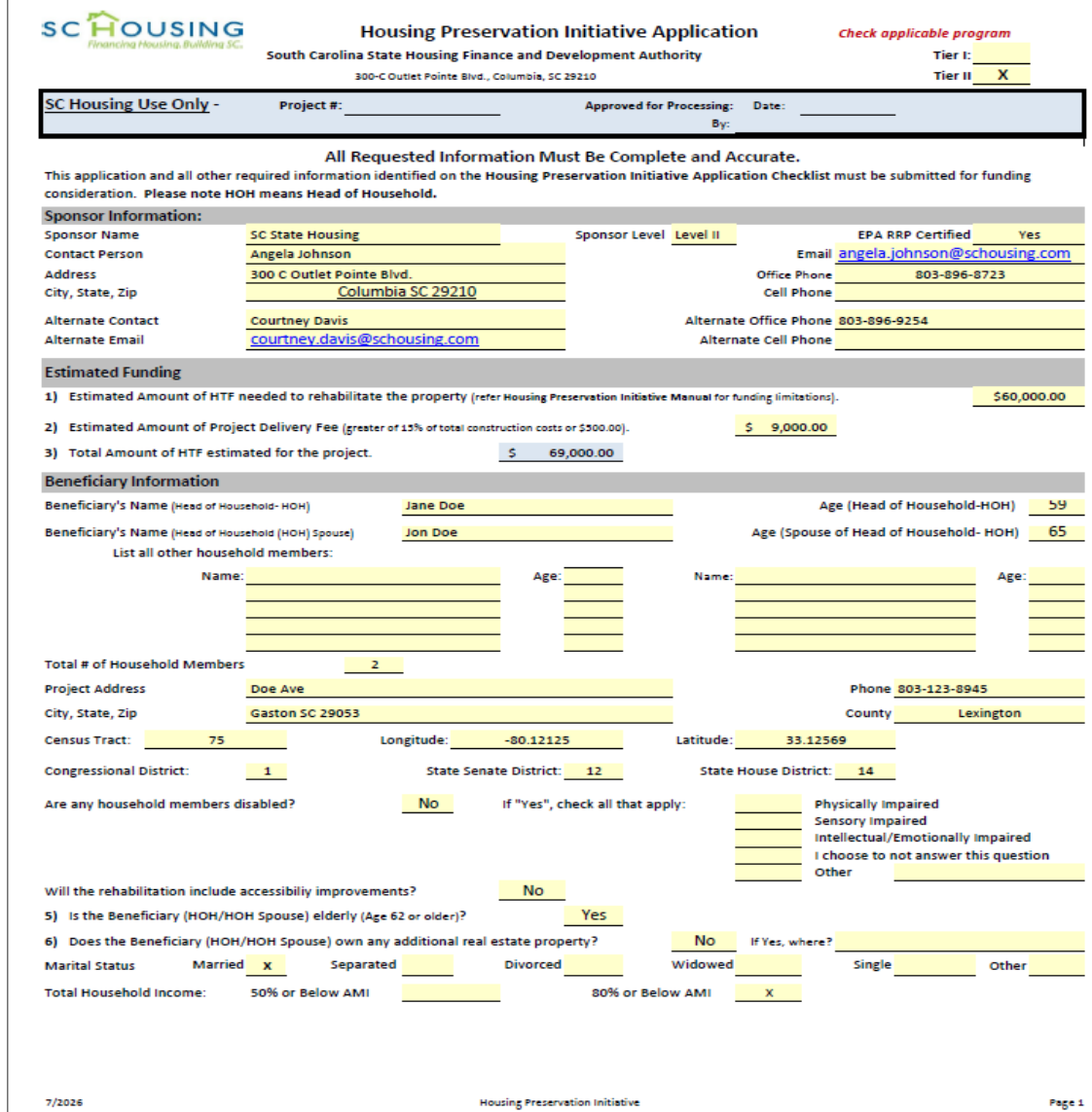
Certified By: Courtney Davis Title: Program Coordinator

Beneficiary: Jane Doe (Signature) Date: 8/17/2026

Certified By: _____

7/2026 Housing Preservation Initiative Page 4

A complete HPI submission



SC HOUSING
Financing Housing, Building SC.

Housing Preservation Initiative Application

South Carolina State Housing Finance and Development Authority
300-C Outlet Pointe Blvd., Columbia, SC 29210

Check applicable program
Tier I:
Tier II X

SC Housing Use Only - Project #: Approved for Processing: Date: By:

All Requested Information Must Be Complete and Accurate.

This application and all other required information identified on the Housing Preservation Initiative Application Checklist must be submitted for funding consideration. Please note HOH means Head of Household.

Sponsor Information:

Sponsor Name	SC State Housing	Sponsor Level: Level II	EPA RRP Certified: Yes
Contact Person	Angela Johnson		Email: angela.johnson@schousing.com
Address	300 C Outlet Pointe Blvd.		Office Phone: 803-896-8723
City, State, Zip	Columbia SC 29210		Cell Phone:
Alternate Contact	Courtney Davis		Alternate Office Phone: 803-896-9254
Alternate Email	courtney.davis@schousing.com		Alternate Cell Phone:

Estimated Funding

1) Estimated Amount of HTF needed to rehabilitate the property (refer Housing Preservation Initiative Manual for funding limitations). $60,000.00
2) Estimated Amount of Project Delivery Fee (greater of 15% of total construction costs or $500.00). $ 9,000.00
3) Total Amount of HTF estimated for the project. $ 69,000.00

Beneficiary Information

Beneficiary's Name (Head of Household- HOH): Jane Doe — Age (Head of Household-HOH): 59
Beneficiary's Name (Head of Household (HOH) Spouse): Jon Doe — Age (Spouse of Head of Household- HOH): 65
List all other household members:

Name:	Age:	Name:	Age:

Total # of Household Members: 2

Project Address: Doe Ave — Phone: 803-123-8945
City, State, Zip: Gaston SC 29053 — County: Lexington
Census Tract: 75 — Longitude: -80.12125 — Latitude: 33.12569
Congressional District: 1 — State Senate District: 12 — State House District: 14

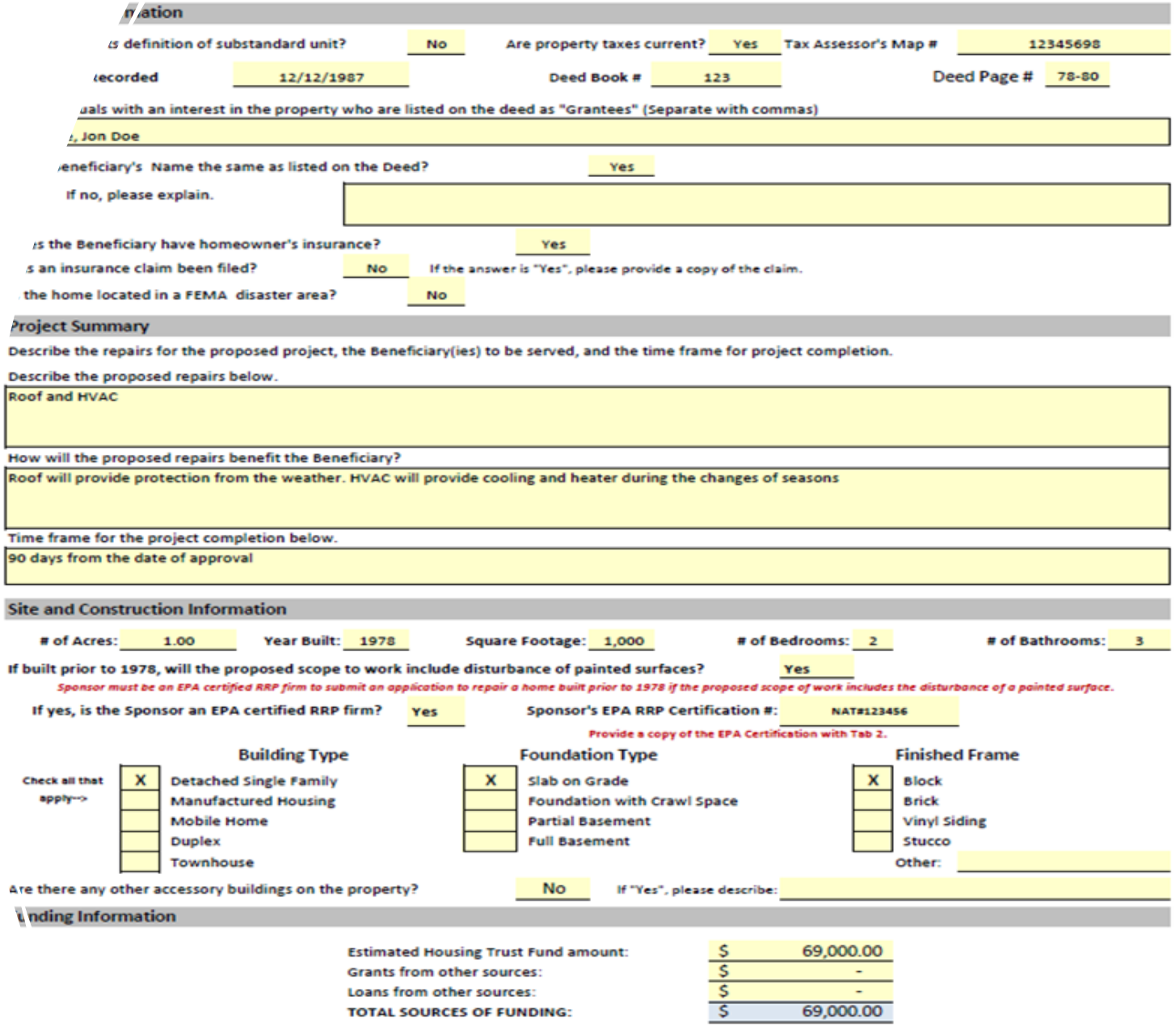
Are any household members disabled? No — If "Yes", check all that apply:
- Physically Impaired
- Sensory Impaired
- Intellectual/Emotionally Impaired
- I choose to not answer this question
- Other

Will the rehabilitation include accessibiliy improvements? No
5) Is the Beneficiary (HOH/HOH Spouse) elderly (Age 62 or older)? Yes
6) Does the Beneficiary (HOH/HOH Spouse) own any additional real estate property? No — If Yes, where?

Marital Status: Married x — Separated — Divorced — Widowed — Single — Other

Total Household Income: 50% or Below AMI — 80% or Below AMI x

A complete HPI submission



ation

s definition of substandard unit? No | Are property taxes current? Yes | Tax Assessor's Map # 12345698

ecorded 12/12/1987 | Deed Book # 123 | Deed Page # 78-80

uals with an interest in the property who are listed on the deed as "Grantees" (Separate with commas)

, Jon Doe

eneficiary's Name the same as listed on the Deed? Yes

If no, please explain.

s the Beneficiary have homeowner's insurance? Yes

s an insurance claim been filed? No If the answer is "Yes", please provide a copy of the claim.

the home located in a FEMA disaster area? No

Project Summary

Describe the repairs for the proposed project, the Beneficiary(ies) to be served, and the time frame for project completion.

Describe the proposed repairs below.

Roof and HVAC

How will the proposed repairs benefit the Beneficiary?

Roof will provide protection from the weather. HVAC will provide cooling and heater during the changes of seasons

Time frame for the project completion below.

90 days from the date of approval

Site and Construction Information

# of Acres: 1.00 | Year Built: 1978 | Square Footage: 1,000 | # of Bedrooms: 2 | # of Bathrooms: 3

If built prior to 1978, will the proposed scope to work include disturbance of painted surfaces? Yes

Sponsor must be an EPA certified RRP firm to submit an application to repair a home built prior to 1978 if the proposed scope of work includes the disturbance of a painted surface.

If yes, is the Sponsor an EPA certified RRP firm? Yes | Sponsor's EPA RRP Certification #: NAT#123456

Provide a copy of the EPA Certification with Tab 2.

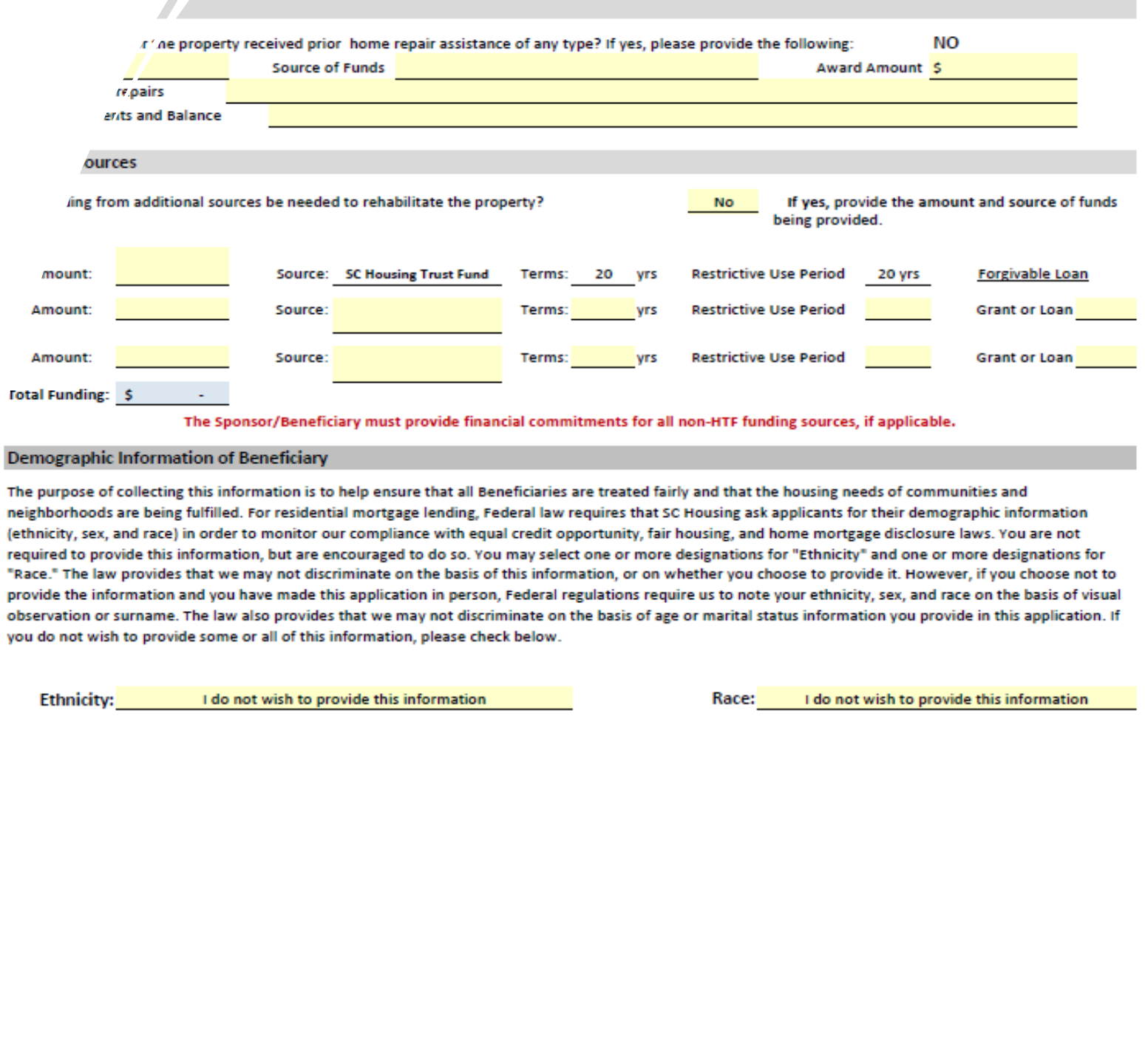
Check all that apply-->	Building Type	Foundation Type	Finished Frame
X	Detached Single Family	Slab on Grade	Block
	Manufactured Housing	Foundation with Crawl Space	Brick
	Mobile Home	Partial Basement	Vinyl Siding
	Duplex	Full Basement	Stucco
	Townhouse		Other:

Are there any other accessory buildings on the property? No | If "Yes", please describe:

nding Information

Estimated Housing Trust Fund amount:	$ 69,000.00
Grants from other sources:	$ -
Loans from other sources:	$ -
TOTAL SOURCES OF FUNDING:	$ 69,000.00

A complete HPI submission



ne property received prior home repair assistance of any type? If yes, please provide the following: NO

Source of Funds

Award Amount $

pairs

ants and Balance

ources

ing from additional sources be needed to rehabilitate the property? No If yes, provide the amount and source of funds being provided.

mount: Source: SC Housing Trust Fund Terms: 20 yrs Restrictive Use Period 20 yrs Forgivable Loan

Amount: Source: Terms: yrs Restrictive Use Period Grant or Loan

Amount: Source: Terms: yrs Restrictive Use Period Grant or Loan

Total Funding: $ -

The Sponsor/Beneficiary must provide financial commitments for all non-HTF funding sources, if applicable.

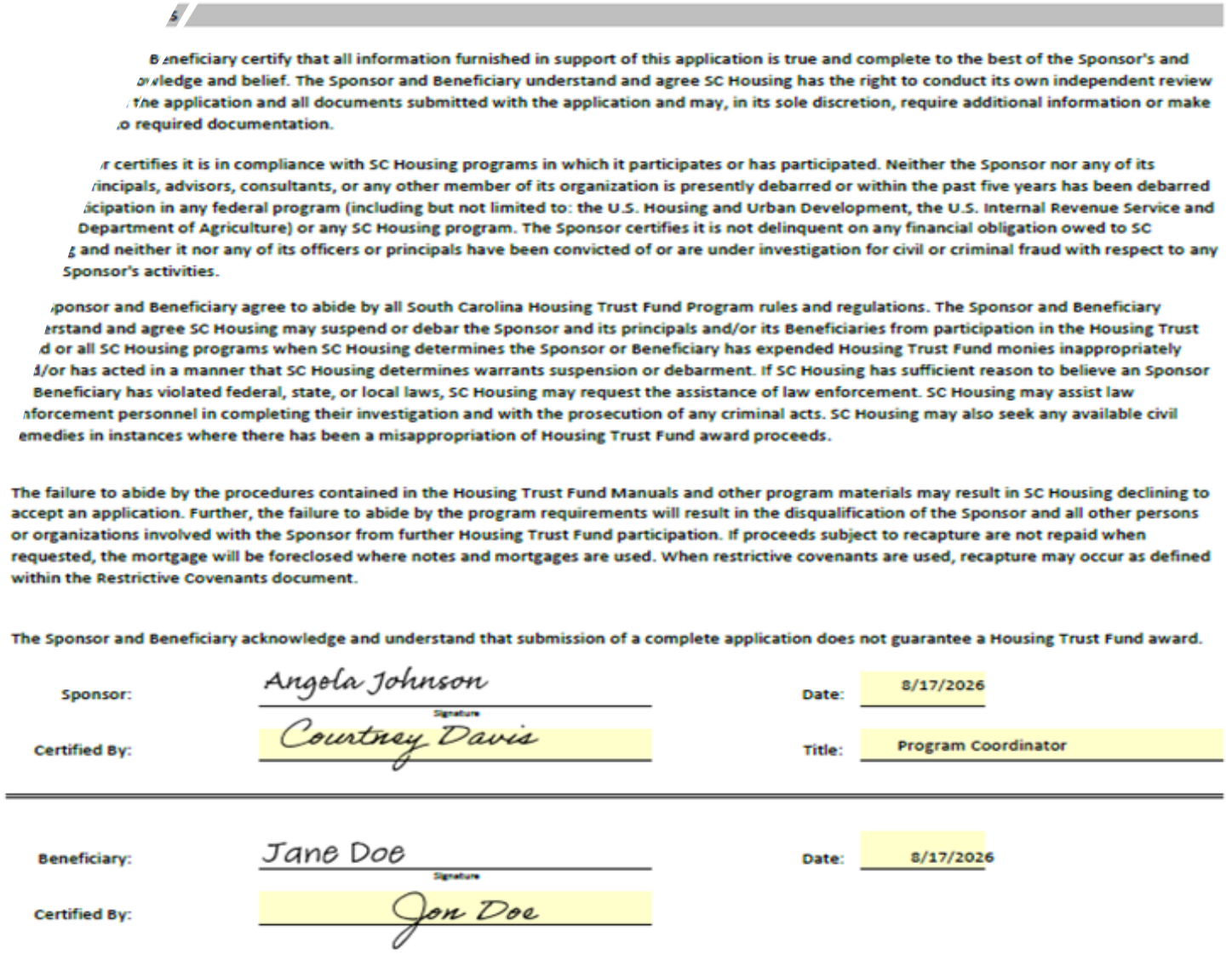
Demographic Information of Beneficiary

The purpose of collecting this information is to help ensure that all Beneficiaries are treated fairly and that the housing needs of communities and neighborhoods are being fulfilled. For residential mortgage lending, Federal law requires that SC Housing ask applicants for their demographic information (ethnicity, sex, and race) in order to monitor our compliance with equal credit opportunity, fair housing, and home mortgage disclosure laws. You are not required to provide this information, but are encouraged to do so. You may select one or more designations for "Ethnicity" and one or more designations for "Race." The law provides that we may not discriminate on the basis of this information, or on whether you choose to provide it. However, if you choose not to provide the information and you have made this application in person, Federal regulations require us to note your ethnicity, sex, and race on the basis of visual observation or surname. The law also provides that we may not discriminate on the basis of age or marital status information you provide in this application. If you do not wish to provide some or all of this information, please check below.

Ethnicity: I do not wish to provide this information

Race: I do not wish to provide this information

A complete HPI submission



5

Beneficiary certify that all information furnished in support of this application is true and complete to the best of the Sponsor's and knowledge and belief. The Sponsor and Beneficiary understand and agree SC Housing has the right to conduct its own independent review the application and all documents submitted with the application and may, in its sole discretion, require additional information or make no required documentation.

r certifies it is in compliance with SC Housing programs in which it participates or has participated. Neither the Sponsor nor any of its rincipals, advisors, consultants, or any other member of its organization is presently debarred or within the past five years has been debarred icipation in any federal program (including but not limited to: the U.S. Housing and Urban Development, the U.S. Internal Revenue Service and Department of Agriculture) or any SC Housing program. The Sponsor certifies it is not delinquent on any financial obligation owed to SC and neither it nor any of its officers or principals have been convicted of or are under investigation for civil or criminal fraud with respect to any Sponsor's activities.

ponsor and Beneficiary agree to abide by all South Carolina Housing Trust Fund Program rules and regulations. The Sponsor and Beneficiary erstand and agree SC Housing may suspend or debar the Sponsor and its principals and/or its Beneficiaries from participation in the Housing Trust d or all SC Housing programs when SC Housing determines the Sponsor or Beneficiary has expended Housing Trust Fund monies inappropriately d/or has acted in a manner that SC Housing determines warrants suspension or debarment. If SC Housing has sufficient reason to believe an Sponsor Beneficiary has violated federal, state, or local laws, SC Housing may request the assistance of law enforcement. SC Housing may assist law nforcement personnel in completing their investigation and with the prosecution of any criminal acts. SC Housing may also seek any available civil emedies in instances where there has been a misappropriation of Housing Trust Fund award proceeds.

The failure to abide by the procedures contained in the Housing Trust Fund Manuals and other program materials may result in SC Housing declining to accept an application. Further, the failure to abide by the program requirements will result in the disqualification of the Sponsor and all other persons or organizations involved with the Sponsor from further Housing Trust Fund participation. If proceeds subject to recapture are not repaid when requested, the mortgage will be foreclosed where notes and mortgages are used. When restrictive covenants are used, recapture may occur as defined within the Restrictive Covenants document.

The Sponsor and Beneficiary acknowledge and understand that submission of a complete application does not guarantee a Housing Trust Fund award.

Sponsor: Angela Johnson (Signature) Date: 8/17/2026

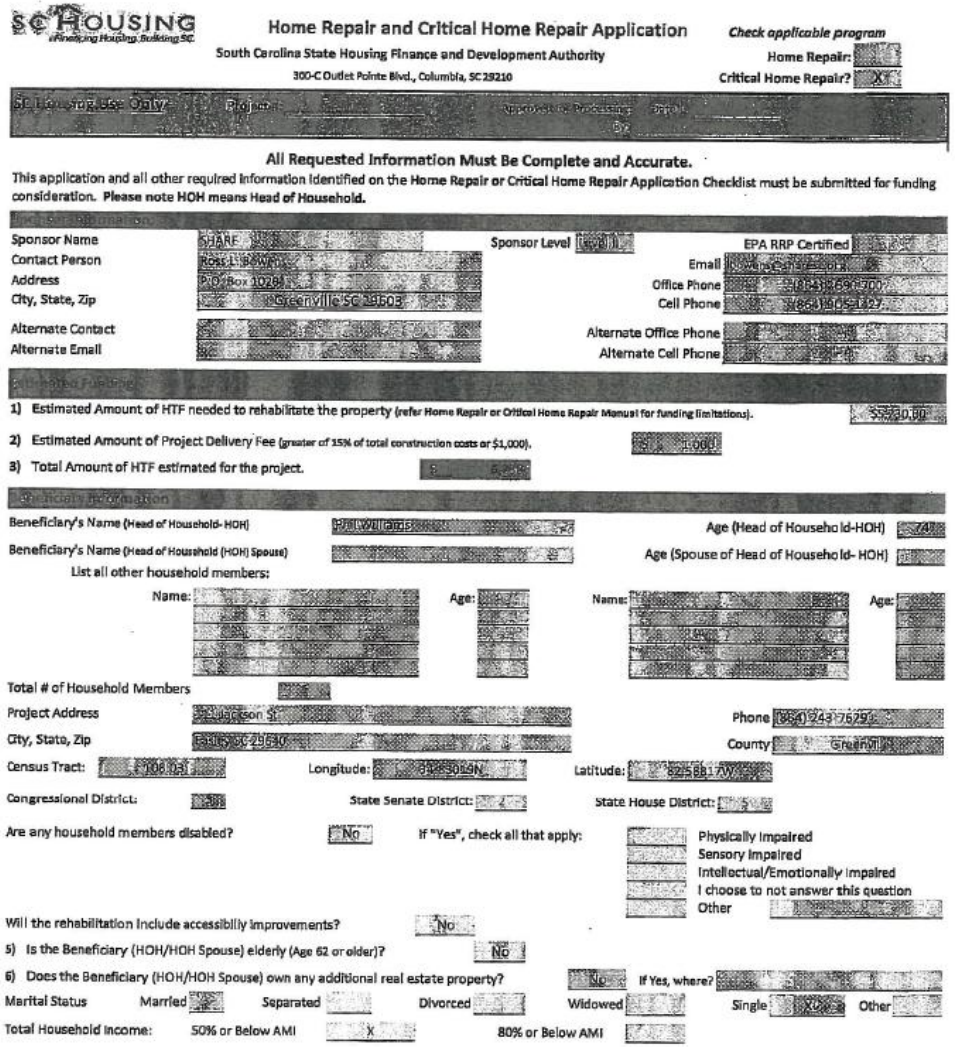
Certified By: Courtney Davis Title: Program Coordinator

Beneficiary: Jane Doe (Signature) Date: 8/17/2026

Certified By: Jon Doe

If you cannot read it, don't submit it.

Application is not legible that was rejected and slowed the process



SC HOUSING
Financing Housing. Building SC.

Home Repair and Critical Home Repair Application

South Carolina State Housing Finance and Development Authority
300-C Outlet Pointe Blvd., Columbia, SC 29210

Check applicable program
Home Repair:
Critical Home Repair? X

SC Housing Use Only — Project — Approved to Proceed — Date — By

All Requested Information Must Be Complete and Accurate.

This application and all other required information identified on the Home Repair or Critical Home Repair Application Checklist must be submitted for funding consideration. **Please note HOH means Head of Household.**

Sponsor Name: SHARE — Sponsor Level: Level II — EPA RRP Certified
Contact Person: Rose L. Brown — Email: [redacted]
Address: P.O. Box 10289 — Office Phone: [redacted]
City, State, Zip: Greenville SC 29603 — Cell Phone: [redacted]
Alternate Contact — Alternate Office Phone
Alternate Email — Alternate Cell Phone

1) Estimated Amount of HTF needed to rehabilitate the property (refer Home Repair or Critical Home Repair Manual for funding limitations). $30,000.00
2) Estimated Amount of Project Delivery Fee (greater of 15% of total construction costs or $1,000). $1,000
3) Total Amount of HTF estimated for the project.

Beneficiary's Name (Head of Household- HOH): P.H. Williams — Age (Head of Household-HOH): 74
Beneficiary's Name (Head of Household (HOH) Spouse) — Age (Spouse of Head of Household- HOH)
List all other household members:

Name:	Age:	Name:	Age:

Total # of Household Members: 1
Project Address: Jameson St — Phone: [redacted]
City, State, Zip: Liberty SC 29657 — County: Greenville
Census Tract: 706.03 — Longitude: 82.50.29W — Latitude: 34.50.29N
Congressional District: 3 — State Senate District: 4 — State House District: 5

Are any household members disabled? No — If "Yes", check all that apply:
- Physically Impaired
- Sensory Impaired
- Intellectual/Emotionally Impaired
- I choose to not answer this question
- Other

Will the rehabilitation include accessibility improvements? No
5) Is the Beneficiary (HOH/HOH Spouse) elderly (Age 62 or older)? No
6) Does the Beneficiary (HOH/HOH Spouse) own any additional real estate property? No — If Yes, where?

Marital Status: Married — Separated — Divorced — Widowed — Single X — Other

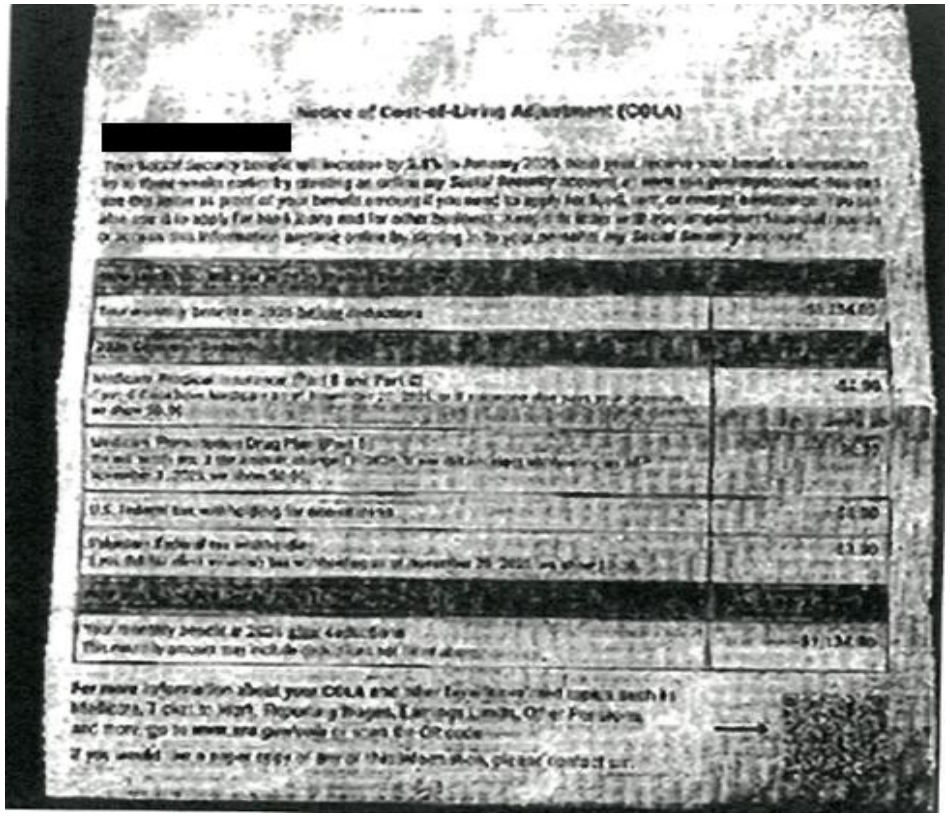
Total Household Income: 50% or Below AMI X — 80% or Below AMI

If you cannot read it, don't submit it. Submitting illegible documents will slow the process

Legible benefit letter VS Not Legible benefit letter

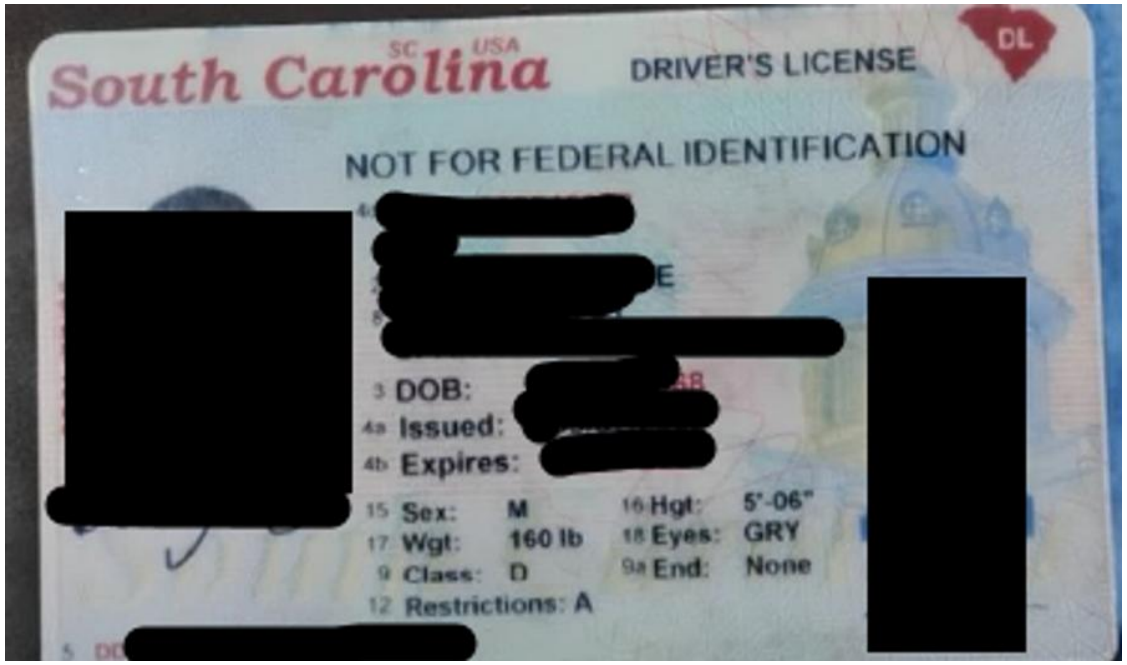
financial records or access this information online by signing into your ***my Social Security*** account.

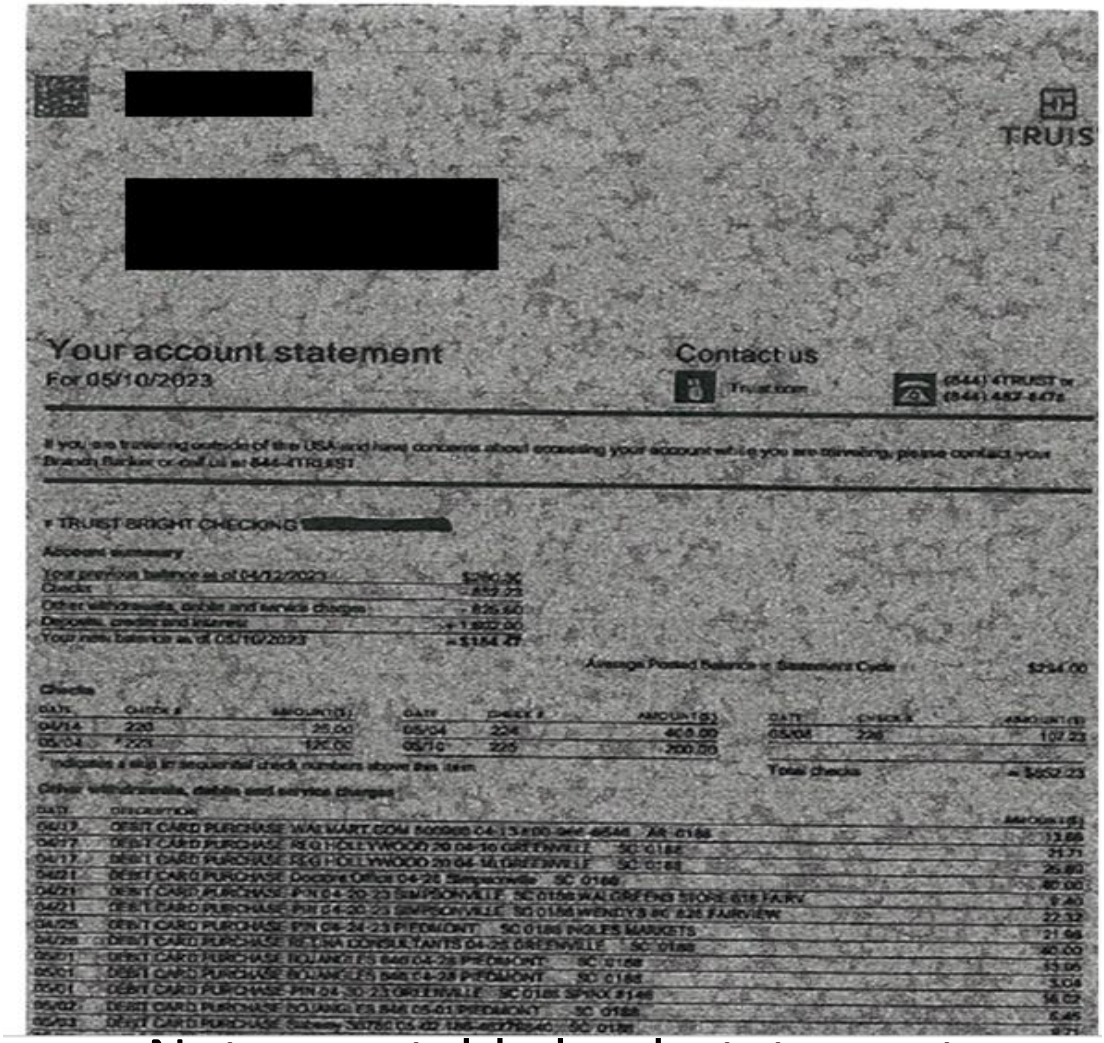
How Much You Will Get In 2025 (Before Deductions)	Monthly Amount
Your monthly benefit in 2025 before deductions	$2,037.00
2025 Common Deductions	**Monthly Amount**
Medicare Medical Insurance (Part B and Part C) If you did not have Medicare as of November 21, 2024, or if someone else pays your premium, we show $0.00.	-$185.00
Medicare Prescription Drug Plan (Part D) We will notify you if the amount changes in 2025. If you did not elect withholding as of November 1, 2024, we show $0.00.	-$0.00
U.S. federal tax withholding for non-citizens	-$0.00
Voluntary federal tax withholding If you did not elect voluntary tax withholding as of November 21, 2024, we show $0.00.	-$0.00
How Much You Will Get In 2025 (After Deductions)	**Monthly Amount**
Your monthly benefit in 2025 after deductions This monthly amount may include deductions not listed above.	**$1,852.00**



If you cannot read it, don’t submit it.

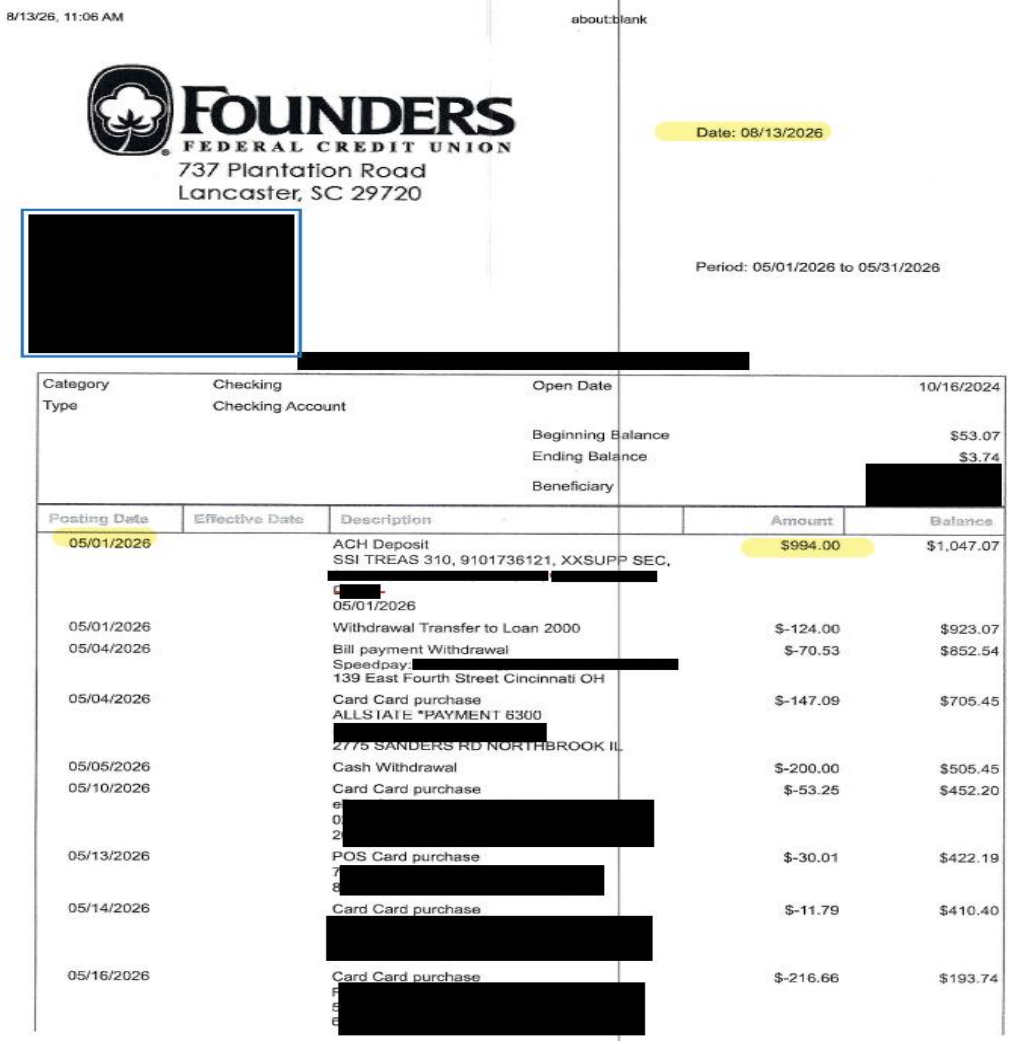
Not a legible drivers license VS A Legible drivers license





Not acceptable bank statement

VS



Legible bank statement

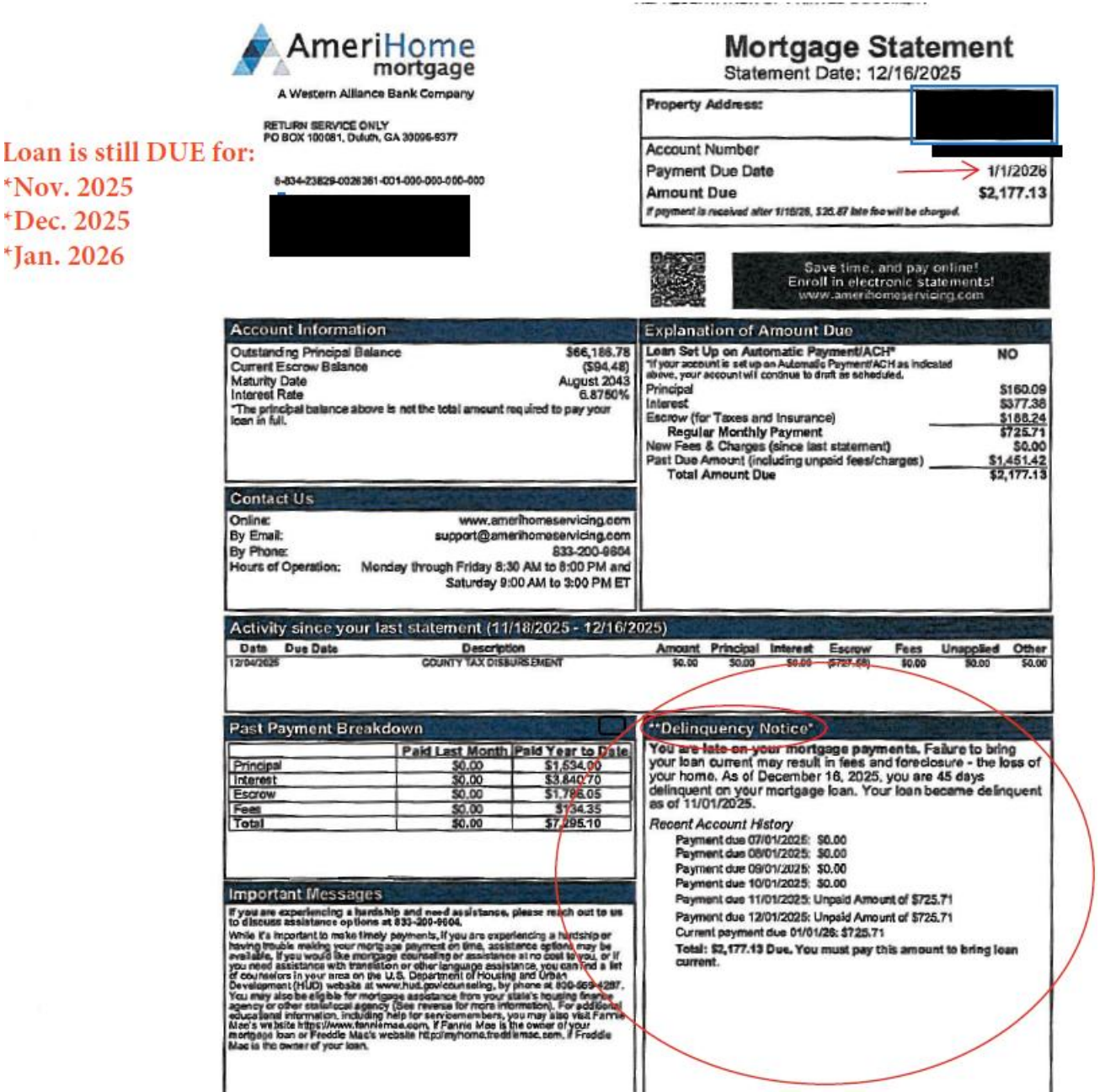
If you cannot read it, don’t submit it

Mortgage Statement

Example of a Delinquent mortgage statement.

Delinquency Notice is circled in red and still vey difficult to

Read.



Loan is still DUE for:
*Nov. 2025
*Dec. 2025
*Jan. 2026

AmeriHome mortgage
A Western Alliance Bank Company

RETURN SERVICE ONLY
PO BOX 100081, Duluth, GA 30096-9377

8-834-23829-0026361-001-000-000-000-000

[redacted]

Mortgage Statement
Statement Date: 12/16/2025

Property Address: [redacted]

Account Number
Payment Due Date 1/1/2026
Amount Due $2,177.13
If payment is received after 1/15/26, $26.67 late fee will be charged.

Save time, and pay online!
Enroll in electronic statements!
www.amerihomeservicing.com

Account Information

Outstanding Principal Balance	$66,186.78
Current Escrow Balance	($94.48)
Maturity Date	August 2043
Interest Rate	6.8750%

*The principal balance above is not the total amount required to pay your loan in full.

Explanation of Amount Due

Loan Set Up on Automatic Payment/ACH*	NO
*If your account is set up on Automatic Payment/ACH as indicated above, your account will continue to draft as scheduled.	
Principal	$160.09
Interest	$377.38
Escrow (for Taxes and Insurance)	$188.24
Regular Monthly Payment	$725.71
New Fees & Charges (since last statement)	$0.00
Past Due Amount (including unpaid fees/charges)	$1,451.42
Total Amount Due	$2,177.13

Contact Us

Online:	www.amerihomeservicing.com
By Email:	support@amerihomeservicing.com
By Phone:	833-200-9604
Hours of Operation:	Monday through Friday 8:30 AM to 8:00 PM and Saturday 9:00 AM to 3:00 PM ET

Activity since your last statement (11/18/2025 - 12/16/2025)

Date	Due Date	Description	Amount	Principal	Interest	Escrow	Fees	Unapplied	Other
12/04/2025		COUNTY TAX DISBURSEMENT	$0.00	$0.00	$0.00	($725.68)	$0.00	$0.00	$0.00

Past Payment Breakdown

	Paid Last Month	Paid Year to Date
Principal	$0.00	$1,534.00
Interest	$0.00	$3,840.70
Escrow	$0.00	$1,795.05
Fees	$0.00	$134.35
Total	$0.00	$7,295.10

Important Messages

If you are experiencing a hardship and need assistance, please reach out to us to discuss assistance options at 833-200-9604.

While it's important to make timely payments, if you are experiencing a hardship or having trouble making your mortgage payment on time, assistance options may be available. If you would like mortgage counseling or assistance at no cost to you, or if you need assistance with translation or other language assistance, you can find a list of counselors in your area on the U.S. Department of Housing and Urban Development (HUD) website at www.hud.gov/counseling, by phone at 800-569-4287. You may also be eligible for mortgage assistance from your state's housing finance agency or other statistical agency (See reverse for more information). For additional educational information, including help for servicemembers, you may also visit Fannie Mae's website https://www.fanniemae.com, if Fannie Mae is the owner of your mortgage loan or Freddie Mac's website http://myhome.freddiemac.com, if Freddie Mac is the owner of your loan.

****Delinquency Notice****

You are late on your mortgage payments. Failure to bring your loan current may result in fees and foreclosure - the loss of your home. As of December 16, 2025, you are 45 days delinquent on your mortgage loan. Your loan became delinquent as of 11/01/2025.

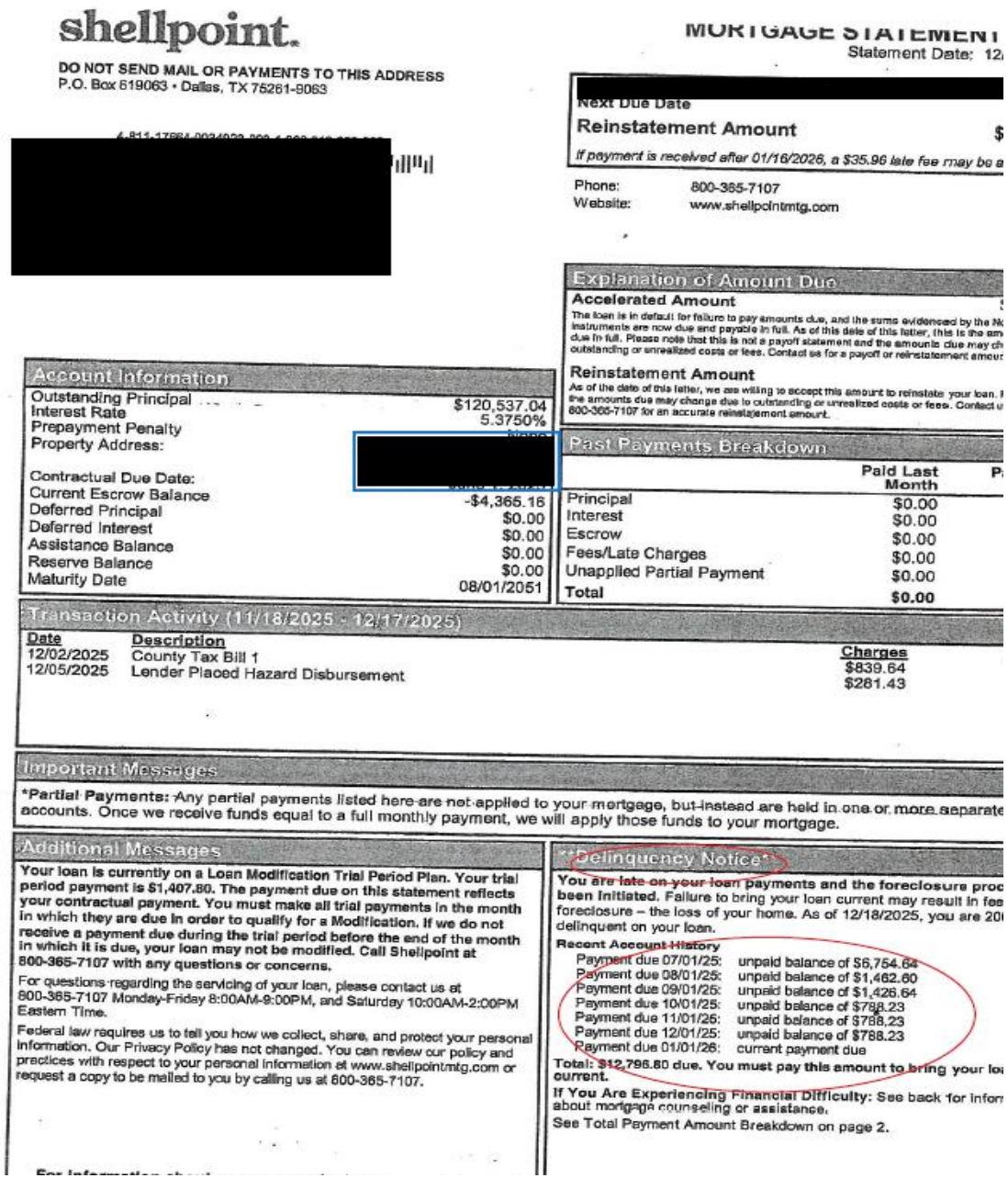
Recent Account History

Payment due 07/01/2025: $0.00
Payment due 08/01/2025: $0.00
Payment due 09/01/2025: $0.00
Payment due 10/01/2025: $0.00
Payment due 11/01/2025: Unpaid Amount of $725.71
Payment due 12/01/2025: Unpaid Amount of $725.71
Current payment due 01/01/26: $725.71

Total: $2,177.13 Due. You must pay this amount to bring loan current.

Mortgage Statements

Another example of a Delinquent mortgage statement. Again, very difficult to read



shellpoint.

DO NOT SEND MAIL OR PAYMENTS TO THIS ADDRESS
P.O. Box 619063 • Dallas, TX 75261-9063

[redacted]

MORTGAGE STATEMENT
Statement Date: 12/

[redacted]
Next Due Date
Reinstatement Amount $

If payment is received after 01/16/2026, a $35.96 late fee may be a

Phone: 800-365-7107
Website: www.shellpointmtg.com

Explanation of Amount Due

Accelerated Amount
The loan is in default for failure to pay amounts due, and the sums evidenced by the N
instruments are now due and payable in full. As of this date of this letter, this is the am
due in full. Please note that this is not a payoff statement and the amounts due may ch
outstanding or unrealized costs or fees. Contact us for a payoff or reinstatement amou

Reinstatement Amount
As of the date of this letter, we are willing to accept this amount to reinstate your loan.
the amounts due may change due to outstanding or unrealized costs or fees. Contact u
800-365-7107 for an accurate reinstatement amount.

Account Information

Outstanding Principal	$120,537.04
Interest Rate	5.3750%
Prepayment Penalty	
Property Address:	[redacted]
Contractual Due Date:	
Current Escrow Balance	-$4,365.16
Deferred Principal	$0.00
Deferred Interest	$0.00
Assistance Balance	$0.00
Reserve Balance	$0.00
Maturity Date	08/01/2051

Past Payments Breakdown

	Paid Last Month	P
Principal	$0.00	
Interest	$0.00	
Escrow	$0.00	
Fees/Late Charges	$0.00	
Unapplied Partial Payment	$0.00	
Total	**$0.00**	

Transaction Activity (11/18/2025 - 12/17/2025)

Date	Description	Charges
12/02/2025	County Tax Bill 1	$839.64
12/05/2025	Lender Placed Hazard Disbursement	$281.43

Important Messages

***Partial Payments:** Any partial payments listed here are not applied to your mortgage, but instead are held in one or more separate accounts. Once we receive funds equal to a full monthly payment, we will apply those funds to your mortgage.

Additional Messages

Your loan is currently on a Loan Modification Trial Period Plan. Your trial period payment is $1,407.80. The payment due on this statement reflects your contractual payment. You must make all trial payments in the month in which they are due in order to qualify for a Modification. If we do not receive a payment due during the trial period before the end of the month in which it is due, your loan may not be modified. Call Shellpoint at 800-365-7107 with any questions or concerns.

For questions regarding the servicing of your loan, please contact us at 800-365-7107 Monday-Friday 8:00AM-9:00PM, and Saturday 10:00AM-2:00PM Eastern Time.

Federal law requires us to tell you how we collect, share, and protect your personal information. Our Privacy Policy has not changed. You can review our policy and practices with respect to your personal information at www.shellpointmtg.com or request a copy to be mailed to you by calling us at 800-365-7107.

Delinquency Notice

You are late on your loan payments and the foreclosure proc been initiated. Failure to bring your loan current may result in fee foreclosure – the loss of your home. As of 12/18/2025, you are 20 delinquent on your loan.

Recent Account History

Payment due 07/01/25:	unpaid balance of $6,754.64
Payment due 08/01/25:	unpaid balance of $1,462.60
Payment due 09/01/25:	unpaid balance of $1,426.64
Payment due 10/01/25:	unpaid balance of $788.23
Payment due 11/01/25:	unpaid balance of $788.23
Payment due 12/01/25:	unpaid balance of $788.23
Payment due 01/01/26:	current payment due

Total: $12,796.80 due. You must pay this amount to bring your lo current.

If You Are Experiencing Financial Difficulty: See back for infor about mortgage counseling or assistance.

See Total Payment Amount Breakdown on page 2.

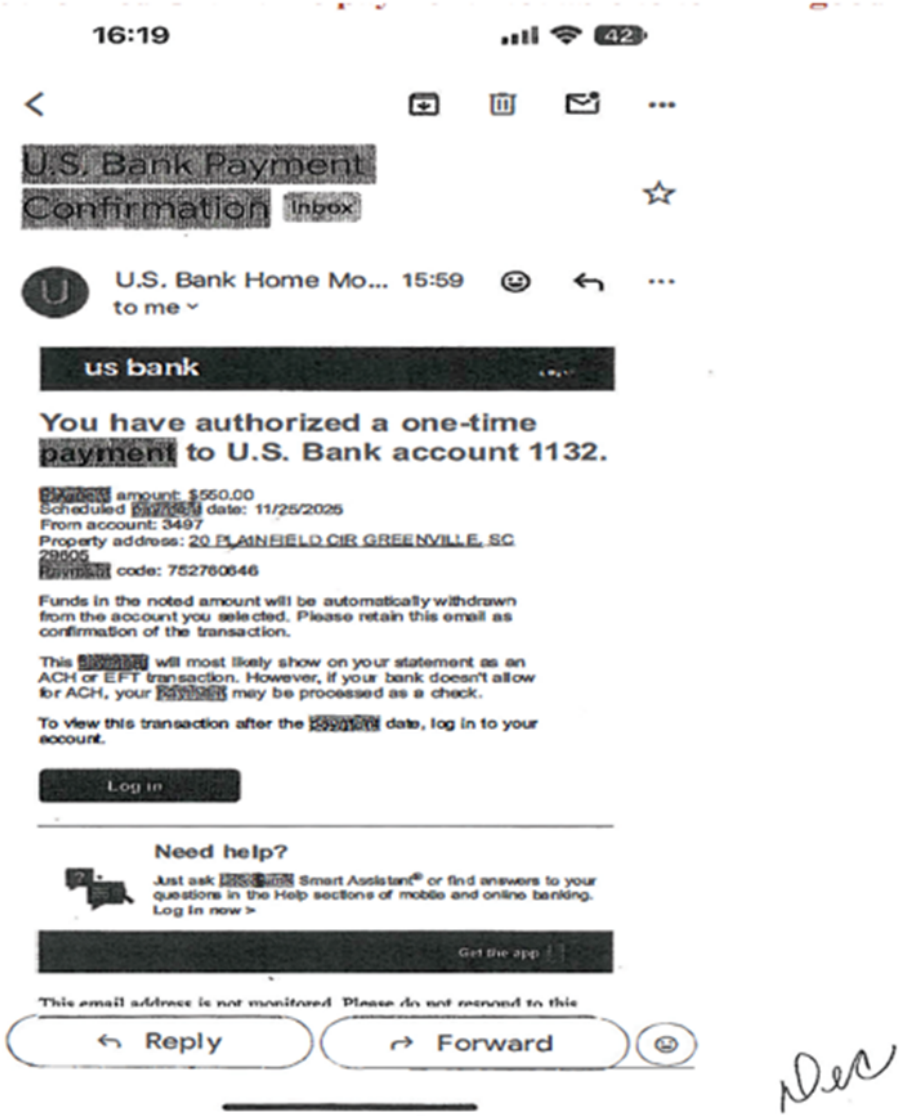
Mortgage statement

A one-time authorized of payment is not a Mortgage statement. Not able to tell if in good standing

- Also, a good example

why screen shots from a

phone are not acceptable.



Deeds

- Properties must be owned by the beneficiary/ homeowner, or the beneficiary must have a life estate interest in the property.

- A copy of the recorded deed from Register of Deeds is required.
  - All owners listed on the deed are required to sign required (HTF-1A) Beneficiary Certification, (HTF-1C) Hold Harmless Agreement, and a (HTF-1B) Hazardous Materials Affidavit forms.

- For properties owned by beneficiary and a deceased person, a death certificate and Deed of Distribution showing the property has been transferred to the beneficiary must be provided.
  - Deeds with surviving party, (husband and wife) with the deceased in a Deed of Joint Tenancy with Right of Survivorship, only a death certificate for the deceased co-title holder is required.

Re Cap

- If an application is received incomplete, it will be rejected
- Handwritten applications and any enclosed documents (work write ups) will not be accepted.
- Please complete all fields in the application with proper data and with a Yes or No to each questions.
- Do not save an application to edit for a new applicant. Please use a new/fresh HPI application for each applicant.
- Make sure page 4 of the HPI application has all required signatures and title for Sponsor along with Certificated By and Beneficiary signature and Certificated By are provided.

Re Cap

- Make sure to list all individuals with interest in the property that's listed on the deed and those signatures are provided on the HTF forms HTF 1A, HTF 1B and HTF 1C.

- Deeds of Joint Tenancy with Right of Survivorship, enclosed the death certificate a death certificate of the decease with the required deed.

- When uploading an application to our Sure File Exchange, make sure the application is organized and tabbed in accordance with the HPI tabbing system.

- Take the time to review all documents for accuracy and clarity. Files are imaged for later access.

Any Questions?