



AUTHORIZATION TO RELEASE INFORMATION

To Whom It May Concern:

I/We have requested assistance from the Equitable Retention Mortgage Assistance (ERMA) program administered by the Center for New York City Neighborhoods, Inc. (CNYCN) and Sustainable Neighborhoods LLC (SN). As part of the ERMA application process, SN and/or CNYCN may verify information contained in my/our application for assistance and in other documents required in connection with the ERMA program, either before an ERMA loan is closed or as part of the ERMA quality control process.

I/We authorize the below Authorized Parties to provide to SN and CNYCN any and all information and documentation that they request. Such information may include but is not limited to: employment history and income; bank, money market, and similar account balances; credit history; and copies of income tax returns.

Authorized Parties:

MORTGAGE 1

SERVICER NAME: _____ ORIGINAL LOAN AMOUNT: _____

LOAN NUMBER: _____

OTHER: _____

I/We further authorize SN and CNYCN to order a consumer credit report and to verify other credit information, including past and present mortgage and landlord references.

It is understood that a copy of this form also will serve as authorization of the foregoing.

Signed by:

_____	_____	_____
Printed Name	Signature	Date

_____	_____	_____
Printed Name	Signature	Date

SAMPLE HARDSHIP LETTER

[Advocacy Letterhead]

[Advocate's Name]

[Street Address]

[City, St Zip]

[Optional – Account Number]

[Today's Date]

Sustainable Neighborhoods LLC
55 Broad Street, 10th Floor
New York, NY 10004

RE: Hardship Letter for [Name of Homeowner Applying for ERMA Loan]

Dear Sustainable Neighborhoods LLC,

[Begin by explaining the hardship the homeowner has experienced that caused the reason for delinquency on their reverse mortgage]

[Describe how their hardship has been resolved and their intentions and ability to make future payments]

[Explain proposed uses of the ERMA loan proceeds, e.g., to pay mortgage arrears, taxes/ insurance/HOA fees that have been advanced by the servicer, and/or set-aside funds]

____ Homeowner would like to request review of eligibility to receive set-aside funds to be held and released by the servicer of the reverse mortgage for up to 24-month period

-or-

____ Homeowner would **NOT** like to request eligibility to receive set-aside funds to be held and released by the servicer of the reverse mortgage for up to 24-month period.

Requested ERMA loan amount¹: _____

Sincerely,

¹ Maximum loan amount under the ERMA program is \$25,000.