

Form SG354

Instructions Page

Purpose

Servicers of conventional MPF[®] Traditional loans must use this form when recommending a workout option for the Borrower pursuant to Chapter 9 of the MPF Traditional Servicing Guide. **This form is for the MPF Traditional product only.**

Preparation

- When: Servicer must complete the form AND submit the required attachments/supporting documentation outlined in Section 3 when recommending a workout option for a Borrower.
- **Who**: This form must be completed by an employee of the Servicer who has responsibilities that would cause such individual to be knowledgeable of the facts and processes needed to complete this form and has authority to certify to the truthfulness and accuracy of the information on this form.
- **How:** Servicer is responsible for creating the final worksheet in a manner compliant with applicable laws and MPF Program requirements.
- Attachments: A completed Form SG 357 Permanent Loan Modification Worksheet must be submitted when the SG354 is being submitted in connection with a permanent loan modification. Temporary Loan Modification Appendix (eMAQCS®plus Form) must be submitted when the SG354 is being submitted in connection with a temporary loan modification.

Submission

- When: The Servicer should retain a copy of the completed form and supporting documentation for their own records, and must submit the SG354 when required to do so by MPF Traditional Servicing Guide Chapter 9.
- **How:** The Servicer must submit the completed form and any supporting documentation through eMAQCSplus at https://eMAQCS.covius.com.
- **To Whom:** The completed form and supporting documentation must be submitted by Servicer to the MPF Provider.

Additional Guidance

Please email the MPF Provider at MPFdefaultservicing@fhlbc.com for any questions or assistance needed in completing or submitting the form.



Helpful Hints

- Servicers are responsible for ensuring loan and borrower eligibility prior to making any workout related offer to a Borrower. This responsibility applies whether or not the MPF Bank's approval was required and obtained. Any MPF Bank approval of a Servicer's workout recommendation will be made based on data and recommendation submitted by Servicer. When a workout plan offered to a Borrower is found not to meet MPF Guide requirements, regardless of whether it was approved by the MPF Bank, the Servicer may be required to purchase or repurchase Mortgage Loan, and indemnify the MPF Bank or MPF Provider for any related losses, damages, costs, fees and expenses. Any such related losses, damages, costs, fees and expenses shall not be allocated to or covered by the First Loss Account or Credit Enhancement for the Master Commitment.
- Servicers of MPF Traditional loans owned by FHLB San Francisco must only offer temporary loan
 modifications that meet the requirements detailed in Exhibit FF, and are NOT permitted to offer
 borrowers the permanent loan modification provided for in this section. All other Servicers may only
 offer the permanent loan modifications as provided for in this section and may NOT offer temporary
 loan modifications.
- In all instances where the Servicer is recommending an exception, the recommendation (including a
 detailed justification for the recommendation and the proposed terms of the recommendation) must
 be submitted on this form and must be granted approval by the MPF Bank before offering the option
 to the Borrower. Submission of a recommendation for exception must be accompanied by all
 supporting documentation that is relevant to the recommendation.
- Servicers are responsible for ensuring they meet all regulatory requirements for responding to
 Borrowers request for loss mitigation. Servicers must allow at least 5 Business Days for any request
 to the MPF Provider or the MPF Bank to be reviewed. To avoid any delays, Servicers must ensure a
 submission is complete and accurate.
- Any form that is incomplete or not submitted with all supporting documentation will be returned to the Servicer.



Section 1: PFI/Servicer Information					
PFI Number:	Servicer Name:				
MPF Loan Number:	Borrower Name:				
Property Address:					
Section 2: Workout Information					
Workout Option Requested (select one) - Section 3.	– All options do require additional documentation outlined in				
Forbearance Plan (Submission of the other exception. Exception details a	is form is only required if: forbearance exceeds 12 months or required in Section 4)				
 Repayment Plan (Submission of this or other exception. Exception details 	form is only required if: repayment plan exceeds 12 months are required in Section 4)				
Payment Deferral (Submission of the	• •				
Permanent Loan Modification (NOT for Servicers of loans owned by FHLB San Francisco - Submission of this form is required)					
Temporary Loan Modification (ONL Submission of this form is required)	Y for Servicers of loans owned by FHLB San Francisco -				
☐ Short Sale (Submission of this form	is required)				
Deed-in-Lieu of Foreclosure (Submi	ssion of this form is required)				
Servicer attests to the following:					
Workout meets applicable eligibility are required in below section)	requirements outlined in MPF guide (If not, exception details				
·	Package was verified to be accurate based on borrower details are required in below section)				
Mortgage Insurance:					
	vorkout is acceptable to MI Company				
Loan does not have Mortgage Insura Bankruptcy :	ance				
. ,	and the proposed workout has been approved by Bankruptcy				
Loan is not subject to active Bankru	otcy				
Payment Deferral / Permanent Loan Mo	odification:				
If repayment of an identified escrow short Servicer attests the borrower has agreed	age is being spread over a term of less than 60 months, to this:				
Yes No No					
Servicer attests the Payment Deferral v	vas accepted by the Borrower(s):				
Yes No No					



Hardship:	
Is borrower hardship related to COVID-19?	
Yes No C	
Is Borrower hardship related to a natural disast disaster area?	er and the property is located in a FEMA declared
Yes No	
Foreclosure:	
If loan is in Foreclosure, provide the Foreclosure sa	ale date (if one has been scheduled):
Loan Information:	
Unpaid Principal Balance:	Last Paid Installment Date:
Date Servicer Received Completed Package from	Borrower:

Section 3: Attachments/Supporting Documentation

The completed form must be accompanied by the following documentation:

Doc Type	Repayment, & Forbearance	Payment Deferral	Permanent Loan Modification	Short Sale	Deed in Lieu	Temporary Loan Modification
Copy of Workout Agreement	Y - Submit	Y - Submit	Y – Submit 3179	N/A	N/A	Y – Submit SG400 and SG401
Payment History starting from last paid installment to current date	N/A	Y- Submit	Y - Submit	N/A	N/A	Y - Submit
Escrow History starting from last paid installment to current date	N/A	Y- Submit	Y - Submit	N/A	N/A	Y - Submit
Escrow Analysis as of Workout Effective Date	N/A	Y - Submit	Y - Submit	N/A	N/A	N/A
Permanent Loan Modification Worksheet	N/A	N/A	Y – Submit	N/A	N/A	N/A
Trial Period Agreement	N/A	N/A	Y - Submit	N/A	N/A	Y - Submit
Permanent Loan Modification Cover Letter	N/A	N/A	Y - Submit	N/A	N/A	N/A
Offer Agreement	N/A	N/A	N/A	Y- Submit	N/A	Y - Submit
Listing Agreement	N/A	N/A	N/A	Y- Submit	N/A	N/A
Payoff Statement through closing date+	N/A	N/A	N/A	Y- Submit	N/A	N/A
Property Valuation	N/A	N/A	Y- Submit	Y- Submit	Y- Submit	N/A
Temporary Loan Modification Appendix (eMAQCSplus Form)	N/A	N/A	N/A	N/A	N/A	Y - Submit

^{*} Additional attachments/supporting documentation may be requested by MPF Provider



⁺ For Short Sales, the total payoff figure should include all advances made by the Servicer including any escrow items advances, legal fees and costs, and property preservation as of the submission date.

Section 4: Exception Details & Workout Request Package Discrepancies (Complete if applicable) Please explain how the proposed workout does not comply with the eligibility requirements and provide the details of the exception being requested: If any information provided in Workout Request Package was found to be inaccurate, please explain discrepancies: Additional Comments: Section 5: Employee Information By submitting this form, I certify that the information contained herein is true and accurate. Printed Name of Employee Submitting Form: Title: Email: Phone Number: Date Completed:

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