

## How Can We Assist?

Member #:

Loan ID:

Date:

Primary Name:

Primary Physical Address:

Home Phone #:  Cell Phone #:

Co-Borrower Name (If Applicable):

Co-Borrower Address (If Applicable):

Co-Borrower Home Phone #:  Co-Borrower Cell Phone #:

This request for assistance concerns my (check all that apply):

- Auto Loan     Personal Loan     Personal LOC     Home Equity     HELOC

Briefly describe your hardship:

Primary Current Employer:

Job Title:

Co-Borrower Current Employer:

Job Title:

If one or more borrowers is receiving unemployment, state which borrower is receiving unemployment and the amount received:

All information must be given for the form to be reviewed. Proof of income is required showing current employer.

**Documents should be submitted by mail, fax, or dropped off at your nearest branch location:**

Mailing Address: PO Box 12037, Las Vegas, NV 89112-0037, Attn: Credit Resolutions

Fax: 702.697.8096

Log on to [silverstatecu.com](http://silverstatecu.com) for locations and directions.

**Payments must continue to be made while this information is being reviewed.**

This request for assistance is not a guarantee. If additional information is requested, a representative from the Credit Resolutions Department will contact all parties involved.