



Emergency Loan Assistance Program (03/24/20)

Consumer Loan Statement of Hardship

If you are experiencing financial hardship, Taylor Bank is here to help.

Loan Number: _____ Today's Date: _____

Borrowers Name: _____ Co- Borrowers Name: _____

Date of Birth: _____ Last 4 of SSN: _____ Date of Birth: _____ Last 4 of SSN: _____

Address: _____

City: _____ State: _____ Zip: _____

Employer: _____ Employer Telephone #: _____

Annual Income: _____ Source of Income: _____

I would like to be considered for payment relief due to the following reason:

- Loss of wages due to reduced hours from employer
- Self-employed- lack of business or non-essential business temporarily closed
- Loss of job due to lack of business or non-essential business closure
- Other- Please explain below:

Optional Documentation: You may submit a copy of the following documents along with this request as proof of financial hardship-

- a. Proof of Income: Most current pay stubs, tax return, or in-house financial statement
- b. Copy of unemployment application (if applicable)

I certify under penalty of perjury that, to the best of my knowledge, all information I included on this form and in any attachments I submitted is true and accurate. I understand that I am responsible for all amounts due and the penalties/ interest will continue to accrue even if this assistance is granted.

Borrower Name

Borrower Signature

Co- Borrower Name

Co- Borrower Signature