



Question	Response	If yes, date of this action plan	If no, date of last action plan
Is this a new action plan?	Yes      No		

## Mortgage Loan and Property Detail

Cash	MBS	Aggregation	REMIC

Servicer

Deal Name / Number

Service Loan Number

## Fannie Mae Loan Number

Origination Date

Property Name

Original Appraised Value

Property Address

Appraisal Date

City

State

Zip

Current UPB of Mortgage Loan(s)

Is Loan Cross-Collateralized with other Loan(s)?	Yes	No
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Current UPB Date

Last Paid Installment Date

If yes, Fannie Mae Loan Number

## Borrower and Management Detail

Owner Occupied?	Yes	No
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Borrower Name

Main Contact Name

Assessment of Borrower's financial condition, including the financial capability of Key Principals or Principals to determine if additional capital is available:

Describe any management concerns:

Property Management Type	Third Party	Self-Managed
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Property Management Company Name

Valuation

Source of Valuation (select one):	
Broker Price Opinion	
New Appraisal	
Direct Cap	
Other	

Most Recent Valuation

Date of Most Recent Value

Potential Loss Amount

If Direct Cap, provide details

If Other, provide details

Analysis / Explanation of Valuation

Operating Data (Please describe the current operations of property, including DSCR and Occupancy trends):

Property Conditions

Describe the current physical condition of the property (include copy of most recent inspection); include a description of previous inspection results and how they compare/contrast with the current condition. Describe any Deferred Maintenance, including the cost of necessary repairs and plans to cure. Include available amount of Replacement Reserves.

Are there any Code Violations?	Yes	No
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If yes, describe violations and steps being taken to cure:

Are tax and insurance deposits sufficient and available for required disbursements?	Yes	No
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If no, describe steps being taken:

Mortgage Loan Default Detail

Reason for Transfer to Special Servicing:	
Payment Default (Loan is Delinquent and cannot be cured prior to 60 days)	
Covenant Default (Default of Loan Document Covenant)	

If Other Default, please specify

Action Taken to Date (Please describe events that led up to default. Include number of times Borrower has been contacted and Borrower response(s), if any):

Recommendation / Update

Course of Action Recommended:	
Foreclosure	
Fannie Mae/Service Workout	
Bringing Borrower Current	
Maturity Extension	
Note Sale	
Other	

If Foreclosure, Bid Amount

Scheduled Foreclosure Date

If Note Sale, Notes Sale Amount

If Other, Specify

Course of Action Details:

If Foreclosure, Provide Detail

Firm Name

Phone Number, if available

If available, Contact Name

E-mail, if available

Firm Address

City

State

Zip

Estimated Resolution Date

Expenses/Foreclosure Bid Calculation	Estimated/Actual Cost	Comments
If Foreclosure, Bid		
Trustee/Legal Fees		
Sales Costs		
Physical Needs Assessment		
Environmental		
Appraisal / BOV		
Taxes		
Insurance		
Receiver Fees		
Other 1		
Other 2		
TOTAL Estimated Resolution Costs		

## Lender Repurchase Information

Question	Response	Date of Expected Repurchase:
Lender Repurchase?	Yes      No	

## If REO, Property Detail

Question	Response	If No, Date of Expected Repurchase	If Yes, Date of Repurchase
REO Property?	Yes      No		
Current UPB		UPB As of Date	
List Price			
Sale Price			

Expense Type	Estimated or Actual Cost:	Comments
Principal Balance		
Interest:		
Late Fees:		
Insurance:		
Property Taxes:		
Appraisal / BOV:		
Foreclosure Fees / Costs:		
Legal Fees:		
Brokers Fees:		
Other:		
TOTAL Estimated Resolution Costs		

## Required Attachments

1. Copy of Note
2. Copy of Recorded Security Instrument
3. Copy of the Recorded Assignment of Security Instrument to Fannie Mae

Servicer Contact Information

Servicer Contact Name

Servicer Contact Phone Number

Servicer Company Name

Servicer Contact E-mail

Servicer Address

City

State

Zip

The Servicer hereby represents and warrants to Fannie Mae that, to the best of its knowledge, the statements made in this Form are true and correct, and that no material facts have been omitted or misstated.

\*An electronic signature is acceptable.

Signed\*

Date

Fannie Mae Contact Information

Action Plan Decision	
Approved	Rejected

Comments on Action Plan Decision:

Fannie Mae Contact Name

Fannie Mae Contact Phone Number

Title

Fannie Mae Contact E-mail Address

\*An electronic signature is acceptable.

Signed\*

Title

Date