

## **REQUEST FOR SHORT SALE**

Owner information.	
Date:	_
	Co-Owner:
SDHC Loan No(s):	
Home/Cell Phone No.:	
Property Address: STREET, CITY, STATE, ZIP CODE	
Email Address:	
Realtor Information:	
Name:	Office/Cell Phone No.:
Email:	
Escrow Company:	
Name:	Escrow No.:
Address:	
	Office/Cell Phone No.:
Email:	<u> </u>
<ul> <li>✓ CHECK LIST – Please email the following items with this form to loanservicing@sdhc.org:</li> <li>Hardship Letter (signed by all borrowers and the real estate agent) requesting the short sale, describing reason for short sale and indicate the amount proposed to pay towards Housing</li> </ul>	
Commission's lien.	and united it proposed to pay towards frousing
Copy of Purchase Contract	
Copy of Preliminary Title Report	
Copy of Escrow Instructions	
Copy of Estimated HUD-1	
Copy of full Appraisal (current-less than 60 d	ays old)
Approval from First Trust Deed Lender	