

[Mortgage Servicer Name]

[Address Line 1]

[City, State, Zip Code]

[Phone Number]

Date: [Current Date]

Borrower Name: [Borrower Name]

Loan Number: [Loan Number]

Property Address: [Property Address]

RE: Approval of Medical Hardship Forbearance Plan

Dear [Borrower Name],

We have reviewed your request for financial assistance regarding your VA-guaranteed home loan due to medical hardship. Based on the documentation provided, we are pleased to inform you that your request for a Forbearance Plan has been approved.

Forbearance Terms:

- **Forbearance Period:** [Start Date] to [End Date]
- **Reduced Monthly Payment:** \$[Amount]
- **First Reduced Payment Due Date:** [Date]

During this period, we will not initiate foreclosure proceedings or report late payments to credit bureaus, provided you adhere to the terms of this agreement. Please note that property taxes and insurance premiums must continue to be addressed through your escrow account.

Next Steps:

Approximately 30 days before your forbearance period ends, we will contact you to discuss permanent loss mitigation options. These options may include a loan modification, repayment plan, or VA refunding, depending on your financial recovery and VA eligibility guidelines.

Please sign and return the enclosed copy of this letter by [Return Date] to acknowledge your acceptance of these terms.

If you have any questions, please contact our Loss Mitigation Department at [Phone Number].

Sincerely,

[Name/Department]

[Mortgage Servicer Name]

Borrower Acceptance:

Signature: _____ Date: _____