

## FACT ACT ADDENDUM TO UNIFORM RESIDENTIAL LOAN APPLICATION

Applicants: \_\_\_\_\_  
\_\_\_\_\_

This Addendum supplements and is made a part of the attached Uniform Residential Loan Application.

We acknowledge that income from medical insurance, disability or wage continuation insurance need not be revealed in the description of other income on page 2 of the Uniform Residential Loan Application unless we choose to have it considered as a basis for repaying this loan.

The extent to which parties may verify, reverify or obtain any information or data relating to the Loan according to the Acknowledgement on page 3 of the Uniform Residential Loan Application may be limited by applicable Federal Law.

Dated \_\_\_\_\_

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Co-Applicant Signature

\_\_\_\_\_  
Co-Applicant Signature

\_\_\_\_\_  
Co-Applicant Signature