

Servicing Bulletin 2018-01 July 13, 2018

To:CHFA ServicersFrom:CHFA Finance DepartmentSubject:Revised 90 Day Delinquency Reporting process, New Title Notification Form
and the Discontinuation of FAIMAN Form

90 Day Delinquency Reporting

Connecticut Housing Finance Authority has enhanced the 90 day delinquency reporting process. Electronic reporting will be mandatory with the September 2018 reporting cycle.

The enhanced reporting is similar to the current reporting process; there are a few additional data fields and a new method for delivering the report to CHFA via a file share program. A copy of the new format is attached along with tables for delinquency status codes and default reason codes. As a reminder, reporting is due to CHFA by the 10th of the month.

Please send the name of the contact person from your organization who will be responsible for sending these files to <u>christina.roy@chfa.org</u> by August 1, 2018. They will be set-up in the file share system and additional information will be sent directly to them.

If you have questions about the electronic reporting process please contact Chrissy Roy at <u>christina.roy@chfa.org</u>. If you have any technical questions about the process, please contact Mike Ware at <u>mike.ware@chfa.org</u>.

FAIMAN Form

Once your organization is submitting 90 day reporting electronically on a monthly basis, you will no longer need to complete and send the FAIMAN Form to CHFA.

Title Notification Form

A new form and process to report title vesting dates *for all properties* is effective immediately. A sample form DS-TITLEVEST.0718, Rev. July 2018 is attached for your reference.

CHFA's Operating Manual – (Section 12) will be updated to reflect these changes shortly.

See attached referenced forms:

90 Day Reporting File Format plus Status and Reason Code Tables (rev. July 2018) Title Notification Form (DS-TITLEVEST.0718, rev. July 2018)

These forms are also available on our website at <u>www.chfa.org</u> under the Lender Forms section.

Questions regarding this Servicing Bulletin should be directed to Liisa Koeper at (860) 571-4226 or <u>liisa.koeper@chfa.org</u> or John Chilson at (860) 571-4247 or john.chilson@chfa.org



This form plus all required documents must be submitted to <u>titlevest@chfa.org</u> within 48 hours of title vesting with CHFA

LOAN	N/PRO	PERI	Y INFORMA	ATION		
CHFA LOAN NUMBER		BOPP	OWER NAME		Click here to enter a da Today's Date	ate.
		DONIN			Today's Dale	
Street Address					Apartment/Unit #	
City				State	ZIP Code	
Servicer			Servicer contact info			
Servicer Loan No.			Loan type	Choose an item	·	
Occupancy Status			Property dan	nage	YES	NO
Ejectment/Eviction in Process	YES	NO □	Hazard claim	n filed	YES	NO □
Property taxes, HOA, utilities paid current?	YES	NO □	Insurer/Guar	antor claim filed?	YES	NO □
HOA information:						
If property damage and/or hazard claim; yes, pl	ease prov	ide upc	late/details her	·e:		

DATES / LEGAL INFORMATION

Last Paid Installment	Click here to enter a date.	First Legal	Click here to enter a date.
Title Vest Date	Click here to enter a date.	First Time Vacant:	Click here to enter a date.
Type of Vesting Instrument	Choose an item.	If FHA, estimated date to convey	Click here to enter a date.

REQUIRED DOCUMENTATION

- □ Mortgage deed, plus legal description recorded
- Instrument placing title with CHFA: Certificate of Foreclosure, Committee Deed, Deed-in-lieu, plus legal description. Recorded if available, if not available, please send recorded within 30 days
- First time vacant inspection report
- Latest property inspection report

Email form plus required title package to titlevest@chfa.org

FOR CHFA USE ONLY	REO INTAKE								
ET/PAYFCL/FST	REO LIST								
NOTIFICATION	WINTERIZED/SECURED		P&P Vendor						
Title Package Complete	LISTED		Realtor						

CHFA Delinquency & Foreclosure Status Codes

The Delinquency & Foreclosure Status Code list is fixed for the purpose of reporting in this file. No additional codes or changes are permitted. If a code is reported that is not in this list, then the record will be rejected. Note: Although some of these codes are equivalent to SFDMS coding, some are not.

Status	Description	Status	Description
01	CHAPTER 13 BANKRUPTCY	30	THIRD PARTY SALE
03	CRAMDOWN	32	MILITARY INDULGENCE
04	CONDO ACTION	42	DELQ/STD COLLECTION PROCESS
08	CHAPTER 7 BANKRUPTCY	43	FORECLOSURE STARTED
09	FORBEARANCE	45	FORECLOSURE COMPLETED
10	PARTIAL CLAIM	46	PROPERTY CONVEYED TO INSURER & CLAIM SUBMITTED
12	REPAYMENT	47	DEED IN LIEU
15	PRE-FORC ACCEPTANCE PLAN AVAILABLE	49	ASSIGNMENT/REFUNDING
17	PRE-FORC SALE	68	FIRST LEGAL/FORECLOSURE IN PROCESS
	REINSTATED BY MORTGAGOR WHO RETAINS		
20	OWNERSHIP	73	CHARGE-OFF/NO RELEASE
26	REFINANCE	78	UNCLAIMABLE CONDITION
28	MODIFICATION	99	EXP REMIB FROM SERVICER PENDING

CHFA Default Reason Codes

Use standard FHA Single Family Housing SFDMS Default Reason Codes. The most common are listed below; a complete list can be found on the HUD's website under "Single Family Default Monitoring System (SFDMS) Reporting Codes" <u>https://portal.hud.gov/hudportal/documents/huddoc?id=SFDMSCodes.pdf</u>

Default Reason Code	Cause of Default	Guidance for Usage: Use selected code to advise HUD that
01	Death of Principal Borrower	The delinquency is attributable to the death of the principal Borrower.
02	Illness of Principal Borrower	The delinquency is attributable to a prolonged illness that keeps the principal Borrower from working and generating income.
03	Illness of Borrower's Family Member	The delinquency is attributable to a principal Borrower having incurred extraordinary expenses as the result of the illness of a Family Member or having taken on the sole responsibility for repayment of the mortgage debt as the result of the Co-Borrower's illness.
05	Marital Difficulties	The delinquency is attributable to problems associated with a separation or divorce, such as a dispute over ownership of the property, a decision not to make payments until the divorce settlement is finalized, or a reduction in the income to repay the mortgage debt.
06	Curtailment of Income	The delinquency is attributable to a reduction in the Borrower's income, such as a garnishment of wages, a change to a lower paying job, reduced commissions or overtime pay, or loss of a part-time job.
07	Excessive Obligations – Same Income, Including Habitual Nonpayment of Debts	The delinquency is attributable to a Borrower having incurred excessive debts (either in a single instance or as a matter of habit) that prevent them from making payments on both those debts and the mortgage debt
14	Military Service	The delinquency is attributable to the principal Borrower having entered Active Duty status and their military pay is insufficient to enable the continued payment of the existing mortgage debt.
15	Other	Should be rarely used – additional reason codes at the request of the industry have been added; indicates that the delinquency is attributable to reasons that are not otherwise included in the list.
16	Unemployment	The delinquency is attributable to a reduction in income resulting from the principal Borrower having lost their job.
31	Unable to Contact Borrower	For use with 30 and 60 Day delinquencies where contact with the Borrower has not yielded a response; should be used rarely for any 90 Day or more delinquency. Indicates that the reason for delinquency cannot be ascertained because the Borrower cannot be located or has not responded to the servicer's inquiries.
INC	Incarceration	The delinquency is attributable to the principal Borrower having been jailed or imprisoned (regardless of whether they are still incarcerated).

Servicer Delinquency & Foreclosure Status Reporting File Format

FIELD	SERVICER CODE (req)	BORR LAST NAME (req)	CHFA LOAN NUMBER (req)	SERVICER'S LOAN NUMBER (req)	DELQ STATUS (req)	AS OF DATE (req)	DELQ REASON (req)	DEFAULT LETTER SENT	FCL START DATE	DATE OF FIRST LEGAL ACTION	SERVICING CONTACT - NAME (req)	SERVICING CONTACT - PHONE # (req)	SERVICING CONTACT - EMAIL (req)	DATE TITLE VESTED WITH CHFA	OCC STATUS (req)	FIRST TIME VACANT DATE	LAST PROPERTY INSPECTION DATE	FHA PART A OR VA ToC COMPLETED	FHA PART A OR VA EXPENSE CLAIM FILED	PMI / USDA INSURANCE CLAIM FILED
Sample Data:	0144	SMITH	012345	000000036 0201	68		02152017	02	11012014	05042015	08012015	Doe, John		860-555-1212	doe.john@serv icer.com		осс	<pre><blank> For date fields with no values, leave blank or zero fill (i.e. '00000000')</blank></pre>		
Sample Record	:	0144,SMITH,01	2345,000000036	, ,	017,02,11012014,	05042015,080120)15,"Doe, John",86	i0-555-1212,doe.j	ohn@servicer.con	n, ,OCC,,,,,	-			I			1			1
FORMAT	####	TEXT	######	TEXT - 20 CHAR MAX	\$\$	MMDDYYYY	\$\$\$	MMDDYYYY	MMDDYYYY	MMDDYYYY	TEXT 50 CHAR MAX	TEXT 20 CHAR MAX	TEXT 50 CHAR MAX	MMDDYYYY	\$\$\$	MMDDYYYY	MMDDYYYY	MMDDYYYY	MMDDYYYY	MMDDYYYY
DESCRIPTION	CHFA CODE ASSIGNED FOR THE SERVICER BEING REPORTED	LAST NAME OF PRIMARY BORROWER	CHFA's LOAN NUMBER - 6 DIGITS RIGHT JUSTIFY ZERO FILL	SERVICER'S INTERNAL REFERENCE NUMBER FOR THIS LOAN	USE CHFA CODES PROVIDED. Refer to the CHFA <u>Foreclosure</u> <u>Status Codes</u> table for applicable codes	DATE WHEN THIS DELINQUENCY STATUS BECAME EFFECTIVE	USE SFDMS DEFAULT REASON CODES. Refer to the <u>Default</u> <u>Reason</u> <u>Codes</u> table for common codes	DATE NOTIFICATION OF DEFAULT LETTER WAS SENT	DATE FORECLOSURE PROCESS STARTED	DATE FIRST PUBLIC LEGAL ACTION REQUIRED TO INITIATE FORECLOSURE WAS COMPLETED	NAME OF PRIMARY CONTACT AT SERVICER FOR ISSUES RELATED TO THIS LOAN	CONTACT PHONE #	CONTACT EMAIL	DATE TITLE WAS TRANSFERRED TO CHFA	"OCC" FOR OCCUPIED, "VAC" FOR VACANT, "UNK" FOR UNKNOWN	DATE PROPERTY BECAME VACANT	LAST DATE PROPERTY WAS INSPECTED	DATE CONVEYED TO GUARANTOR	FILING DATE OF FHA / VA EXPENSE CLAIM	FILING DATE OF MORTGAGE INSURANCE CLAIM

FAQ

File Naming Conventions	It is recommended that file names contain the servicer #, be sequenced with the month and year being reported, and have a .CSV extension. e.g.: FrclRpt0144-201807.csv
First Row Column Headers	The first record in the file may be a column header row. This is optional, if the first record is valid data it will be loaded. All records after the first one must be valid data.
Last Row Totals	Do not include any total or summary data at the end of the file. All records after the first one must match the above format.