

MARYLAND COMMISSIONER OF FINANCIAL REGULATION
NET TANGIBLE BENEFIT WORKSHEET

Borrower(s):

Loan Number:

Lender/Broker:

Date:

I/We, the undersigned borrower(s), plant to enter into a transaction which refinances one or more existing loans with a new mortgage loan secured by my/our home located at:

Address _____
City _____ **State** _____ **Zip Code** _____

Lender/Broker
Name _____
Address _____
City _____ **State** _____ **Zip Code** _____
Direct Tel# _____ **Toll Free #** _____
Fax _____ **Email** _____

I/We acknowledge that:

- I/We understood the costs associated with the new loan;
- The new loan may have different terms (including duration of term and rate of interest) than my/our existing loan(s); and
- The new loan will provide a reasonable, tangible net benefit to me/us after taking into account the terms of both the new and existing loan(s), the cost of the new loan, and my/our particular circumstances.

By refinancing my/our existing loan(s), the following benefits apply to me/us (each borrower should initial any benefit that applies):

- _____ Obtaining a lower interest rate.
 - _____ Obtaining a lower monthly payment, including principal, interest, taxes, and insurance.
 - _____ Obtaining a shorter amortization schedule.
 - _____ Changing from an adjustable rate to a fixed rate.
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- Eliminating a negative amortization feature.
- Eliminating a balloon payment feature.

- Receiving cash-out from the new loan in an amount greater than all closing costs incurred in connection with the loan.

- Avoiding foreclosure.

- Eliminating private mortgage insurance.

- Consolidating other existing loans into a new mortgage.

- Other (please specify): _____

I/We have considered the terms of both the existing and new loans, the cost of the new loan, and my/our personal circumstances. I/We believe the overall benefits of the new loan make the new loan beneficial to me/us for the reason or reasons identified above. By signing below, I/we certify that I/we have read and I/we understand this Net Tangible Benefits Worksheet.

Borrower: _____

Date: _____

Borrower: _____

Date: _____

This Net Tangible Benefit Worksheet has been prescribed by the Commissioner of Financial Regulation in conformity with COMAR 09.03.06.20 (Duty of Care).
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