**DEBT COLLECTION WAIVER/DISPUTE QUESTIONNAIRE**

**NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**NAME USED IN SERVICE IF DIFFERENT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**INPUT/UPDATED DEMOGRAPHICS: Y/N DOES POA ALREADY EXIST: Y/N**

**DO YOU HAVE A PENDING CLAIM WITH VA? Y/N By policy all pending claims are held until the NOD is fully addressed – send letter instead.**

*VA may terminate collection if it is unable to collect any substantial amount, the debtor cannot be located, the debtor is deceased, the cost of collection will exceed recovery, the claim is legally without merit, or the claim cannot be substantiated by evidence. VA is prohibited from granting a waiver request where there was fraud, bad faith, or misrepresentation on your part.* ***VA is prohibited from collecting a debt if doing so would be against “equity” (meaning fairness) or “good conscience” (doing what is right).***

* Is the debt $100,000 or more? Y/N VA cannot reduce unless due to a foreclosure of VA loan – will not consider a compromise if there is any dispute as to the amount of the debt or when there is any fraud or misrepresentation.
* Were you at fault? (i.e. did you fail to report an increase in income that would have disqualified you from receiving a VA pension?)
* Was the VA at fault? (i.e. you reported an increase in income and the VA didn’t reduce your benefits for several months.)
* Would it cause you “undue hardship” to have the benefits withheld (meaning, you would be homeless or unable to buy food and clothing)
* Would you be “unjustly enriched” if the VA didn’t collect the overpayment (would you have a big sum of money in excess of what you need to take care of yourself)
* Is it unfair to collect the money because, in reliance on the benefits, you “changed your position for the worse” (you bought a home)

*VA may grant a waiver (cancel) of the overpayment if you won’t be able to pay housing expenses or buy food or other basic living essentials*

* Do any of these factors apply in your case? Y/N \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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* **Have you received a DMC notice? Y/N Date of letter \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Is the letter (first) less than 30 days? Y/N If yes, if you submit a written request for a waiver within 30 days, you will continue to receive full VA benefits while the request is being processed.**
* **Is the letter (first) more than 30 days but less than 180 days Y/N VA will withhold your benefits on the scheduled date indicated until VA makes a decision on your waiver request. If waiver is granted, you will receive a retroactive payment only if you indicate on your waiver that you are requesting repayment of all payments withheld.**
* **If you submit a written request for waiver within 30 days, you will continue to receive full VA benefits while the request is being processed.**

**If your waiver request is denied, the amount of these benefits will be added to the amount of the overpayment.**

* **Do you dispute this overpayment? Y/N**
* **Would you like to request a waiver to cancel? Y/N**
* **Would you like to request a payment plan? Y/N**
* **Would you like to ask for a payment plan if the waiver is denied? Y/N**

**NOTES: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**The following forms were completed:** VA Form 21-0958 NOD, **Letter requesting Waiver, Letter requesting payment plan, VA Form 5655, VA Form 4138, Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**