



Dear Homeowner,

I'm so glad you took that tough first step and contacted us about your mortgage. We understand how hard that was to do and promise to work with you to find a resolution to your situation.

To assist us in providing you with the most effective and efficient service, please complete the attached worksheet as thoroughly as possible. Please give the monthly spending plan careful attention. This information is the key element of resolving your financial situation. If there are questions or information you don't understand, that's okay. Do your best with it and we will go through the rest of it together.

You will find there is an emphasis on being truthful; we can't help with a successful resolution unless we have a complete and accurate picture of your overall situation. A plan based on only part of your information is certain to fail.

There are some specific documents you will need to locate and bring to your appointment:

- Most recent pay stubs (30 days) for all employment for all household members
- Proof and Source of Other Sources of Income
- Last two months of all bank statements
- Most recent bills and statements for all expenses
- 2008 Complete Tax Returns
- Current Mortgage Statement for First and Second Mortgages (if Applicable)
- Hardship Letter explaining your Financial Situation

**Client Intake Form**

**Applicant:**

\_\_\_\_\_  
First MI Last Name

**Current Address:**

\_\_\_\_\_  
Street

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
County

Rent  Own  Other

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Social Security #: \_\_\_\_\_

\_\_\_\_\_  
Applicant's Employer:

\_\_\_\_\_  
Street

\_\_\_\_\_  
City State Zip Code

Work Phone: \_\_\_\_\_

Occupation/Title: \_\_\_\_\_

How Long Employed: \_\_\_\_\_

Current Household Income: \$ \_\_\_\_\_

Weekly  Monthly  Annually

Household Size \_\_\_\_ # of Dependents \_\_\_\_

Other Sources of Income:

\_\_\_\_\_  
Specify

**Co-Applicant:**

\_\_\_\_\_  
First MI Last Name

**Current Address:**

\_\_\_\_\_  
Street

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
County

Rent  Own  Other

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Social Security #: \_\_\_\_\_

\_\_\_\_\_  
Co-Applicant's Employer:

\_\_\_\_\_  
Street

\_\_\_\_\_  
City State Zip Code

Work Phone: \_\_\_\_\_

Occupation/Title: \_\_\_\_\_

How Long Employed: \_\_\_\_\_

Current Household Income: \$ \_\_\_\_\_

Weekly  Monthly  Annually

Household Size \_\_\_\_ # of Dependents \_\_\_\_

Other Sources of Income:

\_\_\_\_\_  
Specify

**Ethnicity (please check)**

- Hispanic    Non-Hispanic

**Single Race (please check)**

- American Indian or Alaskan Native  
Asian    Black or African American  
Native Hawaiian or Pacific Islander  
White

**Multi-Race**

- American Indian/Alaskan Native & White  
Asian and White  
Black or African American and White  
American Indian or Alaskan Native and Black or African American  
Other Multiple Races

**Gender of Applicant**

- Male                      Female

**Household Status**

- Single Adult    Married without Dependants  
Married with Dependants    Divorced  
Separated    Widowed  
Female or Male Head of Household  
Two or More Unrelated Adults  
Disabled    Veteran  
Senior (Age 62 or Older)

**Highest Level of Education**

- No High School Diploma  
High School Diploma or GED  
2-Year College/ Associates Degree  
Bachelors Degree    Masters Degree  
Above Masters/Doctoral Degree  
Vocational Certification or Some College

**Ethnicity (please check)**

- Hispanic    Non-Hispanic

**Single Race (please check)**

- American Indian or Alaskan Native  
Asian    Black or African American  
Native Hawaiian or Pacific Islander  
White

**Multi-Race**

- American Indian/Alaskan Native & White  
Asian and White  
Black or African American and White  
American Indian or Alaskan Native and Black or African American  
Other Multiple Races

**Gender of Co-Applicant**

- Male                      Female

**Household Status**

- Single Adult    Married without Dependants  
Married with Dependants    Divorced  
Separated    Widowed  
Female or Male Head of Household  
Two or More Unrelated Adults  
Disabled    Veteran  
Senior (Age 62 or Older)

**Highest Level of Education**

- No High School Diploma  
High School Diploma or GED  
2-Year College/ Associates Degree  
Bachelors Degree    Masters Degree  
Above Masters/Doctoral Degree  
Vocational Certification or Some College

**Information on 1st Mortgage**

- Purchase Money  Refinance
- Home Equity Loan  Debt Consolidation
- Other

**Type of Mortgage Loan**

- 30 Year Fixed Rate  15 Year Fixed Rate
- Option ARM Interest Only
- Adjustable Rate Mortgage
- Other

Current Balance: \$ \_\_\_\_\_

Current Interest Rate: \_\_\_\_\_

Current Lender or Servicer: \_\_\_\_\_

Loan Account Number: \_\_\_\_\_

**Investor/Insurer:**

- HUD Insured  PMI  Other  VA
- Fannie Mae  Freddie Mac

Total Monthly Payment: \$ \_\_\_\_\_

Payment Include:  Taxes  Insurance

Number of Months behind: \_\_\_\_\_

Total Arrears: \$ \_\_\_\_\_

**Primary Reason for Default**

- Reduction in Income  Poor Budget Management Skills  Loss of Income
- Medial Issues  Increase in Expenses
- Divorce  Death of Family Member
- Business Venture Failed  Increase in Loan Payment  Not in Default

**Type of Home**

- Single Family  Two Family\*\*
- 3+ Family\*\*  Condo  Other

Rents Received: \$ \_\_\_\_\_

**Information on the 2<sup>nd</sup> Mortgage**

- Purchase Money  Refinance
- Home Equity Loan  Debt Consolidation
- Other

**Type of Mortgage Loan**

- 30 yr. Fixed  15 yr. Fixed
- Option ARM Interest Only
- Adjustable Rate Mortgage
- Other

Current Balance: \$ \_\_\_\_\_

Current Interest Rate: \_\_\_\_\_

Current Lender or Servicer: \_\_\_\_\_

Loan Account Number: \_\_\_\_\_

**Investor/Insurer:**

- HUD Insured  PMI  Other  VA
- Fannie Mae  Freddie Mac

Total Monthly Payment: \$ \_\_\_\_\_

Payment Include:  Taxes  Insurance

Number of Months behind: \_\_\_\_\_

Total Arrears: \$ \_\_\_\_\_

Do you want to stay in the home?

Yes  No

Have you talked to your mortgage company?

Yes  No

Year Purchased: \_\_\_\_\_

Original Purchase Price: \$ \_\_\_\_\_

Estimated Current Value: \$ \_\_\_\_\_

➡ \_\_\_\_\_  
Signature and Date of Intake

➡ \_\_\_\_\_  
Signature and Date of Intake

Household Budget

**Monthly Net Pay**

Employment of Borrower	
Employment of Co-Borrower	
Other of Source of Income	
Other Source of Income	
Total	\$

**Housing Expenses**

First Mortgage Payment	
Second Mortgage Payment	
Real Estate Taxes	
Homeowners Insurance	
Condo Association Fee	
Total	\$

**Auto Expenses**

Car Payment (1)	
Car Payment (2)	
Oil Changes/Maintenance	
Registration and Other Related Fees	
Automobile Insurance	
Miscellaneous Car Expense	
Gas for Both Cars	
Total	\$

**Utilities**

Electric	
Cable/Internet	
Cell Phone	
Telephone Land Line	
Water/Sewer	
Heating (Oil/Wood/Gas)	
Other Utility Bill	
Total	\$

**Revolving Credit Cards**

Credit Card (1)	
Credit Card (2)	
Child Support/Alimony Payment	
Student Loan Payments	
Installment Loans	
Other Credit Payment	
<b>Total</b>	<b>\$</b>

**Life/Health Insurance**

Life Insurance Premiums	
Health Insurance Premium	
Prescriptions	
Medical Co-Pays	
<b>Total</b>	<b>\$</b>

**Food Items**

Groceries	
Cleaning Items/Staples/Household Supplies	
Entertainment/Dining Out	
Hair/Products/Toiletries	
<b>Total</b>	<b>\$</b>

**Miscellaneous Items**

Subscriptions	
Savings Account	
"Mad Money"	
Church Donations	
<b>Total</b>	<b>\$</b>

**Family Members**

Child Care Expense	
School Lunch	
Activities (Specify)	
Clothing Expense	
Family Allowances	
<b>Total</b>	<b>\$</b>

## Disclosure Form for Housing Counseling Clients

I, \_\_\_\_\_, agree to participate in NeighborWorks Greater Manchester's housing counseling and education program, to help me improve my housing situation and/or become a homeowner. NeighborWorks Greater Manchester offers housing and financial counseling, housing redevelopment and workforce development services.

I understand that:

- I am under no obligation to purchase a home from NeighborWorks Greater Manchester
- I understand that NeighborWorks Greater Manchester provides information and education on numerous loan products and housing programs and I further understand that the housing counseling I receive from NeighborWorks Greater Manchester in no way obligates me to choose any of these particular loan products or housing programs.
- The housing counselor and I will discuss my credit history, financial situation, employment, and family. I further understand that it may be necessary for the counselor to discuss this information with representatives of other firms or agencies, to assist me in meeting my housing and homeownership goals.
- I may be referred to other housing services of the organization or another agency or agencies as appropriate that may be able to assist with particular concerns that have been identified. I understand that I am not obligated to use any of the services offered to me whether by NeighborWorks Greater Manchester or by another agency or agencies.
- My personal information will be treated confidentially and will not be divulged to any party that is not directly concerned and specifically authorized by me.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Privacy Policy

NeighborWorks Greater Manchester is committed to assuring the privacy of individuals' and/ or families who have contacted us for assistance. We realize that the concerns you bring to us are highly personal in nature. We assure you that all information shared both orally and in writing will be managed within legal and ethical considerations. Your nonpublic personal information, such as your total debt information, income, living expenses and personal information concerning your financial circumstances, will be provided to creditors, program monitors, and others only with your authorization and signature on the Counseling Agreement. We may also use anonymous aggregated case file information for the purpose of evaluating our services, gathering valuable research information and designing future programs.

### Types of information that we gather about you:

- Information we receive from you orally, on application or other form, such as your name, address, social security number, assets, and income;
- Information about your transaction with creditors, your other, or us such as your account balance, payment history, parties to transactions and credit card usage; and
- Information we receive from a credit-reporting agency, such as your credit history.

### You may opt-out of certain disclosures:

- You have the opportunity to “opt-out” of disclosures of your nonpublic personal information to third parties (such as your creditors), that is, direct us not to make those disclosures.
- If you choose to “opt-out”, we will not be able to answer questions from your creditors. If at any time, you wish to change your decision with regard to your “opt-out”, you may call us at 603-626-4663 and do so.

### Release of your information to third parties:

- So long as you have not opted-out, we may disclose some or all of the information that we collect, as described above, to your creditors or third parties where we have determined that it would be helpful to you, would aid us in counseling you, or is a requirement of grant awards which make our services possible.
- We may also disclose any nonpublic personal information about you or former customers to anyone as permitted by law (e.g., if we are compelled by legal process).
- Within the organization, we restrict access to nonpublic personal information about you to those employees who need to know that information to provide services to you. We maintain physical, electronic and procedural safeguards that comply with federal regulations to guard your nonpublic personal information.

## Credit Report Authorization and Privacy Disclosure Form

I hereby authorize and instruct NeighborWorks Greater Manchester to obtain and review my credit report. My credit report will be obtained from a credit-reporting agency chosen by NeighborWorks Greater Manchester. I understand and agree that NeighborWorks Greater Manchester intends to use the credit report for the purpose of evaluating my financial readiness to purchase a home and/or to engage in foreclosure intervention counseling activities. My signature below also authorizes the release to credit reporting agencies of financial or other information that I have supplied to NeighborWorks Greater Manchester in connection with such evaluation. Authorization is further granted to the credit-reporting agency to use a copy of this form to obtain any information the credit reporting agency deems necessary to complete my credit report. In addition, in connection with determining my ability to obtain a loan, I

Authorize  
 Do Not Authorize

NeighborWorks Greater Manchester to share with potential mortgage lenders and/or counseling agencies my credit report and any information that I have provided, including any computations and assessments that have been produced based upon such information. These lenders may contact me to discuss loans for which I may be eligible, and these counseling agencies may contact me to discuss counseling services. I understand that I may revoke my consent to these disclosures by notifying NeighborWorks Greater Manchester in writing.

\_\_\_\_\_  
Client's Name (Print)

\_\_\_\_\_  
Client's Name (Print)

\_\_\_\_\_  
Client's Signature

\_\_\_\_\_  
Client's Signature

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

Third Party Authorization Form

- 1) I understand that NeighborWorks Greater Manchester provides foreclosure mitigation counseling after which I will receive a written action plan consisting of recommendations for handling my finances, possibly including referrals to other housing agencies as appropriate.
- 2) I understand that NeighborWorks Greater Manchester receives Congressional funds through the National Foreclosure Mitigation Counseling (NFMC) program and, as such, is required to share some of my personal information with NFMC program administrators or their agents for purposes of program monitoring, compliance and evaluation.
- 3) I give permission for NFMC program administrators and/or their agents to pull my credit report up to two additional times between now and June 30, 2010 and to give authorization for NFMC program administrators and/or their agents to follow-up with me between now and June 30, 2010 for the purposes of program evaluation.
- 4) I acknowledge that I have received a copy of NeighborWorks Greater Manchester's Privacy Policy.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Authorization to Release Information

To:

Re: Account Number:

We are working with NeighborWorks Greater Manchester a “HUD Approved Counseling Agency” regarding the above referenced account. We hereby authorize you to release any and all information concerning this account to NeighborWorks Greater Manchester at their request. We further authorize you to discuss this account with the counselors\* of NeighborWorks Greater Manchester. They will be in contact with you to obtain the necessary information. Their contact information is:

NeighborWorks Greater Manchester  
20 Merrimack Street  
Manchester, New Hampshire 03101  
Phone: 603-626-4663  
Fax: 603-623-8011  
[www.nwgm.org](http://www.nwgm.org)

You may continue to release information regarding this account to NeighborWorks Greater Manchester without further authorization.

Thank you in advance for your assistance.

Sincerely,

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Kellie Ann Coffey, Homeownership Manager  
NeighborWorks Greater Manchester  
603-626-4663 x 11  
[kellieann@nwgm.org](mailto:kellieann@nwgm.org)

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Date