MID-FLORIDA HOUSING PARTNERSHIP, INC.,

1834 Mason Ave.-Daytona Beach, FL 32117-Phone (386) 274-4441-Fax (386)274-1415

Dear Homeowner:

We provide foreclosure intervention counseling. To obtain a counseling appointment you will need to gather all the applicable documents listed below. We will review all your options to avoid foreclosure and create an Action Plan to follow for you to reach your objectives. We aid, if needed, in acquiring your credit scores and credit reports (instructions are attached).

Please bring the following required documentation to our office to have an effective appointment:

- 1. Completed attached Pre-screening form
- 2. Completed attached Budget form
- 3. Complete Hardship Letter explaining default to your lender
- 4. Current 60 days proof of all income such as Pay stubs, benefit awarded letters, if self-Employed: YTD Business Profit & Loss Statement and last two years' Tax Returns
- Last two years of personal Tax Returns & W-2(s)
- 6. Current Property Tax Bill and Homeowners

Insurance Policy declarations page

- 7. Current bank statements on all accounts for last six months
- 8. Current credit card billing statements and Installment Loan statements
- 9. Copy of driver's license & social security card
- 10. Divorce Decree, if applicable

- 11. Most recent mortgage statement or Coupon Book for all Mortgage(s)
- Most current correspondence from your Lender, Collection Letters, Foreclosure Summons + Complaint and Answer (if any)
- 13. Copy of Warranty Deed
- 14. Most recent purchase or refinancing Closing documents such as: Mortgage, Note, HUD-1, etc., or bring your complete Closing Folder(s) on all currently held Mortgages
- Need Credit Reports: Equifax, Trans-Union, Experian <u>and</u> Credit Scores (instructions within)
- 16. Bankruptcy Papers, if applicable
- 17. Recent utility billing statements
- 18. Most recent modification paperwork, current or immediate past and all previously approved

Modification Agreements

19. Most recent Second Mortgage billing statement

If you have any questions regarding the above items, please call our office on 386-274-4441 at Option 1 or 2 or 7.

For additional help and information on foreclosure avoidance visit <u>www.makinghomeaffordable.gov</u> and www.KnowYourOptions.com to get details on all your options.

Lydia Gregg Senior Housing Counselor 386-274-4441, Option 2 Fax: 386-274-1415

Lydia.Gregg@mfhp.org

Patricia "Pam" Lauer Housing Counselor 386-274-4441, Option 7 Fax: 386-274-1415

Patricia.Lauer@mfhp.org

Joanna Maldonado***
Housing Coordinator
386-274-4441, Option 1
Fax: 386-274-1415

Joanna.Maldonado@mfhp.org

***Hablamos su Idioma

Homeowner Pre-Screening

Head of Household:

Address:		e-mail address- Cell Work Amo										
Phone # Home		Cell		Work	Vork							
Non-payment of mortgage	due to:		Purchased M	fonth/YR	/	\$						
1. Business venture failed	b		Refinanced N	Nonth/YR	1	\$						
2. Death of family member	er		How many m	ntgs.:	Mkt. Value:							
3. Divorce/separation			Name of mtg	Balance								
4. Increase in expense												
5. Increase in loan payme	ent											
6. Other			Real Estate	Taxes Pd. Ye	es / No							
7. Reduction in income				Total # of	Disabled							
Ethnicity of Head of House	ehold:			Persons	Elderly							
American Indian/Alaskan	Native		Have you be	en served wit	th a foreclosur	e summons?						
Asian/Pacific Islander			Yes/No	When	Answered:	Yes/No						
Black Non-Hispanic			How many pa	ayments are	you in default'	?						
Hispanic			Mtg. Pymt. \$		P&I	PITI						
White Non-Hispanic			Mtg. Int Rate		Mtg. Int Rate	;						
First Generation Mixed Ra	ace		Refinanced	Yes/No	When:							
Adults in Household		Mtg. Balance	e:\$		Relation to Head							
Name	Age	DOB	SS	S#	of Household	Status						
Self					Head							
Children in Household												
Name	Age	DOB		Relation	nship							
Sources of Income -Montl	nly (Gross)			Rate per	Hours per	Office Use						
Social Security	\$	Employment		Hour	Week	Only						
Dependant S.S.I.	\$											
Disability Income	\$											
Child Support Yes/No	\$											
Boarder Income	\$											
VA/Retirement/Pension	\$											
Self Employed annual inc	ome	#yrs	#mo		-							
Other Income	\$	-		Yrly Income	Total:							
We understand that any intentio	nal or negligent r	representation's o	of the information	contained on th	nis form may							
result in civil liability under the p	rovisions of Title	18 United States	Code, Section 1	001								
Applicant's Signature			Co-Applicant's									
Income Category		Interviewer		-	Date							
How did you hear about o	ur program?	•		SHIP in pa	ast: Yes	No						
Have you ever used our s	ervices in the	past?		Hope Now Referral: Yes / No								

Homeowner's Pre-screening pg.2

Level

Level		
1	Social Security Income \$	How long received
2	Self Employed Yes No	For how long
3	Unemployed: Yes No How Long	Unemployment Comp Y / N
4	Retirement Income Yes No	How long received
5	Child Support \$	Receiving Yes No How frequently
6	Boarder Income Yes No	How long received
7	Employer Name:	Employer Name:
8	Date Started Position	Date Started Position
9	Yrs. In profession	Yrs. In profession
10	Employer Name:	Employer Name:
11	Date Started Position	Date Started Position
12	Yrs. In profession	Yrs. In profession
13	House Type: House/Condo/Townhome/Mobile	Home+land/Manufactured Home/Duplex
14	Name of Loan Officer/Mortgage Broker	
15	Name of Mortgage Company that gave you the	eloan
16	Current Mortgage Company	
17	Original Purchase Price \$	How long lived in home: Yrs. Months
18	Mortgage Loan #	
19	Mortgage Company phone #	
20	Mtg. Type: Conventional, FHA, VA, ARM, Inte	rest Only, Private
21	Amount past due on Mortgage	\$
22	2nd Mtg-Home Equity Line of Credit	Balance \$ Monthly Pmt \$
23	Delinquent on 2nd? Yes No Amt. past due:	Months Delinquent:
24	Credit Card:	Credit Card:
25	acct. no	acct. no
26	min pymt balance	min pymt balance
27	Credit Card	Credit Card
28	acct. no	acct. no
29	min pymt balance	min pymt balance
30	Auto Loan Bal.	Auto loan made by:
31	Auto Loan Bal.	Auto loan made by:
32	Personal Loan Balance	Maker of loan:
33	Personal Loan Balance	Maker of loan:
34	Student Loan Balalnce \$ Maker:	Deferred: Yes No How long
35	Checking Acct. Bal.:	Savings Acct. Bal.:
36	Home for sale Yes No Realtor:	Loan previously modified Yes No
37	When Modified	# of Times Modified
38	Bankruptcy Declared Yes No	Discharge Date:

MONTHLY BUDGET AMOUNT

MUNIALY BUDGET	AMOUNT
INCOME:	
EMPLOYMENT (NET / TAKE HOME)	\$
OVERTIME	\$
INTEREST & DIVIDEND	\$
NET RENTAL INCOME / BOARDER	\$
OTHER INCOME	
Bonuses	\$
COMMISSIONS	\$
SS / SSI / VA / PENSION	\$
CHILD SUPPORT	\$
AFDC	\$
ALIMONY	
UNEMPLOYMENT	\$
OTHER	\$
WITHHOLDING	\$
FOOD STAMPS	
TOTAL NET INCOME	\$
FIXED EXPENSES:	
Аито	
ROADSIDE ASSIS. (I.E. AAA)	
AUTO INSURANCE	\$
Auto Loan	\$
AUTO TAGS/INSPECTION	\$
AUTO REPAIRS/MAINT.	\$
GASOLINE	\$
PARKING/TOLLS	\$
CHILD SUPPORT/ALIMONY	\$
CREDIT CARD MINIMUM PAYMENTS	\$
CREDIT COLLECTIONS	-
BANKRUPTCY	\$
DEBT MANAGEMENT PLAN	\$
IRS or other taxes	\$
JUDGEMENT	\$
COLLECTIONS/JUDGEMENTS	\$
EDUCATION	4
SCHOOL LUNCHES	\$
Tuition	\$
BOOKS / SCHOOL SUPPLIES	\$
ENTERTAINMENT	Ф
ATHLETIC EVENTS/HOBBIES	\$
HOUSING PAYMENT	ψ
1 ST MORTGAGE	¢
2 ND MORTGAGE	\$
OTHER MORTGAGES	\$
	\$
HOME COWNERS ASSOC.	\$
HOME EQUITY LINE	\$

	G 1888
HOMEOWNERS/RENTERS	\$
INSURANCE	-
PROPERTY TAX	\$
LAWN CARE	\$
RENT	\$
INSTALLMENT LOANS	
Installment Loan	\$
PAYDAY LOAN	\$
Personal Loan	\$
STUDENT LOAN	\$
Insurance	
ACCIDENT AND DISABILITY	\$
HEALTH INSURANCE	\$
LIFE INSURANCE	\$
MEDICAL	
DENTIST	\$
DOCTOR VISIT / CO-PAY	\$
VISION/GLASSES/CONTACTS	\$
MED. BILLS/PAY ARRANGEMENTS	\$
MEDICATIONS	\$
MISCELLANEOUS	
OTHER DESCRIPTIONS	\$
CONTRIBUTIONS (NOT PAYROLL)	
401K/SEP/IRA	\$
COLLEGE FUND	\$
STOCKS/INVESTMENTS/MUTUAL	\$
FUNDS	
TAX	
UTILITIES	
Internet	\$
CABLE TV	\$
CELL PHONE	\$
ELECTRICITY	\$
TRASH SERVICES	\$
HEATING (NAT GAS OR OIL)	
WATER / SEWER	\$
TELEPHONE	\$
DISCRETIONARY EXPENSES:	
CHARITY	
Church Donations	\$
FAMILY HELP/ASSISTANCE	\$
OTHER GIFT/DONATION	-
CHILD SUPPORT/ALIMONY	
CHILD SUPPORT/ALIMONY	\$
CREDIT COLLECTIONS	<u> </u>
CHAPTER 13 BANKRUPTCY	\$
DINING OUT	<u> </u>

FAST FOOD	\$
RESTAURANT	\$
EDUCATION	
SCHOOL FEES	\$
Воокѕ	\$
SUPPLIES	\$
ENTERTAINMENT	
BOOKS/NEWSPAPER/MAGAZINE	\$
LOTTERY	\$
MOVIES TICKETS	\$
NETFLIX/HULU/ELEC. GAMING	\$
FOOD AND GROCERIES	
FOOD AT WORK	\$
GROCERIES	\$
GIFTS	
BIRTHDAY GIFTS	\$
CHRISTMAS	\$
Household	<u> </u>
ALCOHOLIC BEVERAGES	\$
ALLOWANCE FOR CHILDREN	\$
CHECKING ACT FEES	\$
BARBER/BEAUTY SHOP	\$
CHILD CARE	\$
Товассо	\$
CLEANING SUPPLIES	\$
CLOTHING	\$
FITNESS MEMBERSHIP	\$
DEPENDENT CARE	\$
PERSONAL ITEMS/TOILETRIES	\$
FAMILY PICTURES/PHOTOS	\$
LAUNDRY/CLEANING	\$
MAD MONEY	\$
REPAIRS/MAINTENANCE	\$
MOVIE RENTAL/ REDBOX	\$
Union Dues	\$
OTHER HOME MAINTENANCE	\$
PEST CONTROL	\$ \$
SECURITY SYSTEM	\$
	\$
HOUSING PAYMENT	·
FLOOD INSURANCE	\$
	\$
INSTALLMENT LOANS	
	\$
PROPERTY	
MISC. LOANS	\$
INSURANCE	

HEALTH INSURANCE (IF NOT	\$
DEDUCTED FROM PAYROLL)	
MISCELLANEOUS	
Other	\$
RENT TO OWN	\$
FURNITURE BILL/PAYMENT	\$
PET EXPENSE	
PET SUPPLIES	\$
PET EXPENSES	\$
PUBLIC TRANSPORTATION	
VOTRAN/UBER/TAXI	\$
RENTAL PROPERTY	\$
SYSTEMATIC SAVINGS	
EMERGENCY FUND	\$
SPECIFIC GOAL:	\$
Sp. Goal	
Sp. Goal	\$
Sp. Goal	\$
HOME MAINT.:	
TAX	
TAX (NOT INCLUDED	\$
ELSEWHERE)	
UTILITIES - BUNDLED	
INTERNET/CABLE/PHONE	\$

TOTAL EXPENSES	\$
TOTAL INCOME	\$
LESS TOTAL EXPENSES	\$
SURPLUS / DEFICIT	\$
PRINT NAME	
PRINT NAME	
PRINT NAME	
PRINT NAME SIGNATURE	
SIGNATURE	
SIGNATURE	

Reporting Scams:

Reporte de Fraude y Trampa:

There are six red flags homeowners should look out for. These include any person or company that:

- Asks for a fee in advance
- Guarantees they can stop a foreclosure or get your loan modified
- Tells you to stop paying your mortgage company and pay them instead
- Pressures you to sign paperwork you haven't had a chance to read thoroughly and that you don't fully understand
- Claims they're offering 'government-approved' or 'official government' loan modifications
- Asks you to release financial information online or over the phone, even though you've never heard of them

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do any of the	ne follov	ving: pay	a fee, sign	a contract,	redirect mo	ation or we rtgage payı	re you as ments, si	ked to gn over
do any of the	rently de	ving: pay y, or stop	a fee, sign making lo	a contract,	redirect mo s?	rtgage payı	nents, sig	gn over
do any of the title to your	rently de	ving: pay y, or stop	a fee, sign making lo	a contract,	redirect mo s?	rtgage payı	nents, sig	gn over

SUGGESTED CONTENTS OF A HARDSHIP LETTER

An effective hardship letter will include the following:

- Identifying information: This will include the homeowners' names, address and account number.
- The introductory paragraph should state the foreclosure prevention tool that the homeowner is seeking.
- The second paragraph should describe the hardship, and the reason for the hardship in detail.
- The next paragraph should give an overview of the homeowners' income and expenses and explain any anticipated changes in income (or expenses) and when the changes may occur. It should also state whether the homeowner has a lump sum saved to offset any delinquency.
- Then, describe the proposed plan. The description should state when the plan will be effective, list the reasons why the homeowner believes it will work, and include a statement about why the homeowner is committed to see the plan through to its conclusion.
- The closing paragraph should state the methods and times to contact the homeowner(s) and counselor.

Attachments:

- o Financial Statement/budget sheet.
- Income and expense verifications.
- Hardship verification (e.g. medical documents, separation papers, court documents, etc.)
- Verification for anticipated changes to income and expense.

FREE

CREDIT REPORT

To get your reports there are three ways to get them.

1. Order your three reports by call 1-877-322-8228 reports will be mailed to your home.

OR

2. Go to <u>www.annualcreditreport.com</u> you may see and print all three reports.

OR

3. Print out a request form from the website above and mail to. Annual Credit Report Request Service, P.O. Box 105281 Atlanta, GA 30348-5281

FREE

CREDIT SCORES

To get you scores there are three websites you to go.

Print out a score from each site.

- 1. www.creditkarma.com (linked to Equifax & TransUnion)
- 2. www.creditsesame.com (linked to TransUnion)
- 3. www.experian.com (this will give you a report & a FICO score) ***

*** Highly Recommended







Annual Credit Report Request Form

You have the right to get a free copy of your credit file disclosure, commonly called a credit report, once every 12 months, from each of the nationwide consumer credit reporting companies, Equifax, Experian and TransUnion.

For instant access to your free credit report, visit www.annualcreditreport.com.

For more information on obtaining your free credit report, visit www.annualcreditreport.com or call 877-322-8228.

Use this form if you prefer to write to request your credit report from any, or all, of the nationwide consumer credit reporting companies. The following information is required to process your request. Omission of any information may delay your request.

Once complete, fold (do not staple or tape), place into a #10 envelope, affix required postage and mail to: Annual Credit Report Request Service P.O. Box 105281 Atlanta, GA 30348-5281.

Pleas	se us																										es liste	ed bel	ow:
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If additional information is needed to process your request, the consumer credit reporting company will contact you by mail.

