



Home Partnership, Inc.
626 Towne Center Drive, Suite 301
Joppatowne, MD 21085
Phone: 410-679-3200
Fax: 410-679-3208
E-mail: info@homepartnershipinc.org

Dear Homeowner,

Per your phone call to Home Partnership, Inc. (HPI) regarding your mortgage, enclosed please find an intake package that must be filled out, signed and returned to our office before any counseling may begin.

HPI is a HUD-certified Housing Counseling Agency. HPI does not provide any direct monetary assistance in relation to a delinquency of mortgage at this time. Our office provides budget counseling and loss mitigation services, assisting clients in working out solutions to maintain homeownership when possible.

Many clients are calling to inquire about the State programs. Please know that these programs are directed towards those who are behind on their mortgage SOLELY BECAUSE of their mortgage. A forward ability to pay your mortgage is critical to qualify for these programs. For important information about qualifying for state programs, please visit www.mdhope.org.

What are some steps you can take while waiting for your counseling appointment?

- Contact your lender's toll-free customer service number, ask for the **Loss Mitigation** department, and request a workout package
- Save, Save, Save. Then save some more. Almost all workouts will require some type of down payment.
- Look into increasing income in some way. Sell assets, get a part-time job, or rent out a room.
- Gather necessary documentation: Pay stubs, Mortgage Statements, Bank Statements, and statements for any other monthly expenses.

Please submit the completed and signed intake packet via facsimile or postal mail as soon as possible. Returned packets that are incomplete will result in a delay of counseling services. Once received your completed intake package will be assigned to a housing counselor.

Sincerely,

Kimberley J. Cowie
Housing Counselor



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Foreclosure Prevention Client Intake

Referred By _____ Case # _____

Have you spoken to any other housing agency about your mortgage? Y N If yes, who?

Name _____
Date of Birth _____ Social Security Number _____
Address _____

Phone # _____
Email _____

Race / Ethnicity _____ Family Size _____ Single Head of Household? Y N
Disabled? Y or N

Mortgage Company _____

First Mortgage

When did Mortgage start? _____ Current Payment _____
Current Interest Rate _____ How many months behind are you? _____

What type of mortgage do you have?
Conventional VA FHA ARM Negative Amortization Balloon Interest-only Option Payment
If an ARM, when will rate reset? _____

Have you contacted the lender about the delinquency? Y N
If yes, what was lender's response?

Did lender send you a workout package? Y N Have you sent the package back? Y

Second Mortgage

When did Mortgage start? _____

Current Payment _____

Current Interest Rate _____

How many months behind are you? _____

What type of mortgage do you have?

Conventional VA FHA ARM Negative Amortization Balloon Interest-only Option Payment

If an ARM, when will rate reset? _____

Have you contacted the lender about the delinquency? Y N

If yes, what was lender's response?

Did the lender send you a workout package? Y N

Have you sent the package back? Y N

Are taxes and insurance escrowed? Y N

Are taxes and insurance up-to-date? Y N

Have you EVER filed bankruptcy? Y N If so, when? _____ Is the house currently on the market? Y N

Are you currently employed? Y N

Current Annual Income? _____

Approximate Income when you took the loan out? _____

What has caused you to become behind in your mortgage?

What is your current ability to pay your mortgage and other debt obligations?

What steps have you taken in response to the reason you are behind in your mortgage?

Please make sure to include ALL debt obligations on the enclosed Budget form.

Please return this completed form and all attachments by mail or fax to address at top of the letter



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Foreclosure Mitigation Counseling Agreement

1. I understand that Home Partnership, Inc. 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 agencies as appropriate.
2. I understand that Home Partnership, Inc. 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 Home Partnership, Inc.'s Privacy Policy. I agree to reimburse Home Partnership, Inc. the cost of a merged credit report not to exceed \$18.00. Reimbursement due at time of counseling session.
5. 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.
6. A counselor may answer questions and provide information, but not give legal advice. If I want legal advice, I will be referred for appropriate assistance.
7. I understand that Home Partnership, Inc. provides information and education on numerous loan products and housing programs and I further understand that the housing counseling I receive from Home Partnership, Inc. in no way obligates me to choose any of these particular loan products or housing programs.

Client's signature _____

Date _____

Client's signature _____

Date _____



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Privacy Policy

What kinds of information we collect: We collect information about you, (for instance, your name, address, telephone number) and information about your transaction, including identity of the real property that you are buying. We obtain copies of source documentation of your financial status and/or program eligibility (e.g. W-2's, pay stubs, bank statements, etc.) We get this information from you. We also get your social security number, which is disclosed if required per program or funding source requirements or for identification purposes, and we may receive additional information from third parties including appraisals, credit reports, land surveys, escrow account balances, and sometimes bank account numbers to facilitate the transaction.

How we use this information: **Home Partnership, Inc. (HPI), in giving or specifically adopting this notice does not share your information with marketers outside it's own family. There is no need to tell us to keep your information to ourselves because we share your information only to determine your eligibility for HPC Programs, or in other ways permitted by law. The privacy laws permit some sharing without your approval. We may share internally and with nonaffiliated third parties in order to carry out and service your transaction, to protect against fraud or unauthorized enforcement agencies including the U.S. Department of Housing and Urban Development. Companies within a family may share certain information among themselves in order to identify and market their own products that they think may be useful to you.**

How we protect your information: **We restrict access to nonpublic personal information about you to those employees who need the information to provide products or services to you. We maintain physical, electronic and procedural safeguards that comply with the law to guard your nonpublic personal information. We enforce the company's privacy policy with our employees.**

If you have any questions, please let us know. **We will continue to protect the privacy, accuracy and security of customer information given to us.**

Name

Date

Name

Date



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Mortgage Authorization Form

Lender Name: _____

Loan Number: _____

I am currently working with Home Partnership, Inc., and I hereby give you permission to discuss my mortgage account and any related information with the staff of Home Partnership, Inc. until this authorization is verbally withdrawn by me.

Print Name

Mortgagor Signature

Date

Print Name

Mortgagor Signature

Date



You need to gather (but do not send) the following documents:

Your most recent mortgage statement or payment coupon.

Any material that you have received in the mail or at your house from your mortgage company or a lawyer

Two months of bank statements

Your last 2 pay stubs or social security awards letter

All closing documents, documents/disclosures from originating lender/broker received by client prior to and at closing

Tax returns, W-2 or 1090 for the most recent 2 years

Credit report (if available)

Other income documentation (including child support, social security, renter income, government assistance)

Two most recent months utility bills (including electric, trash, gas, water, cable, phone internet, cell phone)

Amount of cash on hand

Auto loan statement

Student loan statement

Other installment loan statements

ADDITIONAL TIPS TO FOLLOW AS SOON AS YOU RECEIVE THIS PACKAGE:

Contact the toll-free number on the bottom of your last mortgage statement and asked to speak to a representative in the **Loss Mitigation** department. Asked the representative to send you a “loss mitigation or workout package” immediately.

Start a communication log. Keep track of every conversation that you have about your mortgage (including date of conversation, person you spoke to and the result of your conversation).

Start saving! Put aside every penny that you can.

When modification or forbearance will be requested from your lender, you may need to write a **“hardship letter”**. The letter may be handwritten and needs to say:

You want to remain in your house;

the date that you fell behind on making payments;

the reason that you fell behind on making payments;

how the situation has changed or will change so that you will be able to afford a repayment or modified loan.



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Proposed Action Plan

What action steps are you prepared to take in response to your current situation?

Find an additional job

Investigate alternative day care providers

Have someone move in to help with expenses /
Rent a room

Pack meals instead of buying

Ask family members to contribute

Reduce utility expenses (turn off lights, unplug
appliances, not letting water run)

Modify Transportation

Ask your place of worship for assistance

Carpool

Downsize car

Turn off / Modify services

Combining trips / Restrict driving

Cable

Sell your property

Landline telephone

Satellite radio

Gym membership

Any other action steps?

Client Signature

Date

Counselor Recommendations:

Counselor Signature

Date



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Please complete this budget form as completely and accurately as possible.

Monthly Expenses	Current	Goal
Rent or mortgage payment		
Utilities		
Telephone & cell phones & internet access		
Groceries		
Household supplies & toiletries		
Meals and snacks at work		
Meals and beverages out w/family & friends		
Day care/baby sitters		
Loans/credit cards/child support		
Health insurance (not payroll deducted)		
Doctor and Dentist bills		
Prescriptions		
Vehicle insurance		
Vehicle repairs and maintenance		
Gas		
Parking, tolls and mass transit		
Tuition, books and education		
Charitable/Religious contributions		
Cable/Satellite/Video Rentals		
Entertainment/Vacations/Travel		
Tobacco/Alcohol/Lottery Tickets		
Gifts		
Health club/sports/hobbies		
Dues/subscriptions/uniforms/equipment		
Clothes for household		
Dry cleaning/laundry		
Hair/nail appointments		
Repairs and maintenance		
Savings		
All other		
Total		
Net monthly income (Annual ÷ 12)		
Difference		