



For staff use only: Workshop Date _____ Client # _____

Financial Recovery Application

Workshop	<p>Required To Attend a Financial Recovery Workshop:</p> <p><input type="checkbox"/> Completed application with budget (pages 1-4 of this packet)</p> <p><input type="checkbox"/> Signed releases and disclosures (pages 4-10 of this packet)</p>
One-on-One Counseling	<p><i>Counseling sessions can be scheduled <u>after</u> you attend the workshop. If you would like the soonest possible appointment, please bring all supporting documents to the workshop.</i></p> <p>Required <u>Before</u> Scheduling a Counseling Session (check all that apply to you):</p> <p><input type="checkbox"/> Photo ID, of all those people listed on the loan</p> <p><input type="checkbox"/> Proof of income:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Two months of pay stubs (must include employer name, address, phone) <input type="checkbox"/> Award letters (SSI, SSDI, etc.) <input type="checkbox"/> Lease agreement (for any rental income) <input type="checkbox"/> If self-employed: year-to-date profit and loss statement <p><input type="checkbox"/> Last two years federal tax returns and W2s</p> <p><input type="checkbox"/> Hardship letter: a 1 page factual statement of your hardship, and your desired outcome from the servicer (<i>please let us know if you need help with this</i>)</p> <p><input type="checkbox"/> Bank statements - last two months (last 4 if self-employed)</p> <p><input type="checkbox"/> Mortgage information:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Most recent mortgage statement <input type="checkbox"/> Latest correspondence from lender <input type="checkbox"/> Copy of the Note from all mortgage loans on this property <input type="checkbox"/> Trustee's Notice of Sale (if received) <p><input type="checkbox"/> Most recent utility bill(s)</p> <p><input type="checkbox"/> Most recent property tax statement (<i>if taxes not included in monthly payment</i>)</p> <p><input type="checkbox"/> Declaration page of homeowner's insurance (<i>if not included in monthly payment</i>)</p>

We cannot schedule an appointment until all necessary documents are turned in. Copies only – documents will not be returned.

If you have any questions please contact the NEDCO office nearest to you:

<p>Lane County 541-345-7106 888-345-7106 Fax: 541-345-9584 Mailing address: NEDCO 212 Main Street Springfield, OR 97477</p>	<p>Mid-Willamette Valley 503-779-2680 877-320-1479 Fax: 503-779-2682 Mailing Address: NEDCO 2700 Market St NE, Suite 110 Salem, OR 97301</p>
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Please complete the following information (including signatures) for everyone listed on the Mortgage.

Loan Holder

Name _____
Address _____
City _____ State ____ Zip _____
Home Phone _____
Work Phone _____
Cell Phone _____
Email _____
Date of Birth _____
Social Sec. # _____

Co-Loan Holder

Name _____
Relationship to client: _____
Work Phone _____
Cell Phone _____
Email _____
Date of Birth _____
Social Sec. # _____

Do you live in the house? Yes No

Do you live in the house? Yes No

2 Years of Employment (attach another sheet if you need more room):

Employer name: _____
Address: _____
Phone: _____
Dates of employment: _____

Employer name: _____
Address: _____
Phone: _____
Dates of employment: _____

What hardship caused you to struggle with your mortgage? _____

Is this hardship: short-term (<6 months) long-term (>6 months) permanent

When did you purchase the home? _____ What is your desired outcome for your home? Sell Keep

Are you in active bankruptcy? Yes No If yes, who have you been working with? _____

When were any previous bankruptcies discharged? _____

Is your home listed with a realtor? Yes (With whom? _____, include listing agreement) No

What is the property type? Single Family Condo Duplex/Multiplex Mobile Home (Own land? _____)

Current market value (if known): _____ Source of value: _____

Describe the general condition of your home/property: _____

Did you contact, or were you contacted by a company offering to modify your loan for a fee prior to contacting NEDCO? Yes No If yes, who _____ Did you pay them for their services? Yes No

Have you contacted, or were you contacted by a debt consolidation company prior to contacting us?

Yes No If yes, who _____ Did you enter into a contract with them? Yes No

Did you take a Homebuyer Education Course prior to purchasing this home?

Yes (Location _____ Date _____) No

How did you hear about NEDCO? _____

What is the total annual income for the household? _____

Number of people claimed as dependents on your federal income tax return: _____ Total in household: _____

Marital status: Single Married Divorced Widowed **Female Head of Family?** yes no



1st Mortgage

Lender Name: _____ Loan Number: _____
 Who is your investor? FHA VA Freddie/Fannie Other: _____
 Monthly payment: _____ Interest Rate: _____ % Rate type: Fixed Adjustable
 Current amount due: _____ How many months late are you on the payment: _____
 Current Unpaid Principal Balance: _____
 Have you received a Notice of Sale from this lender? Yes No If yes, sale date: _____
 Who pays property taxes: I do Lender Are your property taxes current? Yes No
 Who pays homeowners insurance: I do Lender Is your homeowner's insurance current? Yes No
 Name of homeowner's insurance carrier _____ Phone _____
 Do you have Mortgage Insurance? Yes No If yes, which type: FHA VA Private Other
 Do you pay HOA fees? Yes, \$ _____ No

Most recent mortgage statement required to be returned with application

2nd Mortgage

Lender Name: _____ Is this loan a Home Equity LOC? Yes No
 Loan Number: _____ Date of loan: _____
 Payment: _____ Interest Rate: _____ % Rate type: Fixed Adjustable
 Current amount due: _____ How many months late are you on the payment: _____
 Have you received a Notice of Sale from this lender? Yes No If yes, sale date: _____

Most recent loan statement required to be returned with application

Please select both Ethnicity and Race:

- Race:** (select as many as apply) American Indian or Alaskan Native Multi-racial
 Asian Other
 Black or African American Native Hawaiian or Other Pacific Islander
 White Choose not to respond

- Ethnicity:** (select only one) Hispanic or Latino
 Not Hispanic or Latino
 Choose not to respond

- Disabled?** yes no
Farm worker? yes no
Veteran? yes no

- Highest level of education completed:**
 Primary
 High School
 Vocational
 College
 Master's Degree
 Doctorate
 Non-traditional
 None

I/We understand the information I/we have provided in this application will be kept confidential. I/We certify that all the statements made on this application are true to the best of my/our knowledge. I/We understand that any misrepresentation, false or misleading statement may result in immediate termination of services with NEDCO.

Applicant: Printed Name _____ Signature _____ Date _____

Co-Applicant: Printed Name _____ Signature _____ Date _____

Please fill out **ALL WHITE SPACES**. A Homeownership Counselor will work through the rest with you at your appointment.

Budget

from _____ to _____

Household Size _____

	Gross	Net		Gross	Net
Job #1			Job #2		
Child Support			Unemploy.		
WIC			Other Income		
SSI/SSDI			Other Income		
SNAP			Total Income		

Housing	Estimated	Actual	Goal
1st Mortgage			
2nd Mortgage			
Taxes/Ins/HOA			
Rent			
Cable			
Internet			
Phone			
Elect./Water			
Gas			
Trash			
Subtotal			
Transport.	Estimated	Actual	Goal
Fuel			
Maintenance			
Bus			
Subtotal			
Insurance	Estimated	Actual	Goal
Car			
Health			
Life			
Renter's			
Subtotal			
Shopping	Estimated	Actual	Goal
Groceries			
Dining Out			
Clothing			
Household			
Cleaning			
Toiletries			
Subtotal			

Misc.	Estimated	Actual	Goal
Child Exp.			
School Exp.			
Medical/Dental			
Pet Care			
Entertainment			
Subtotal			
Sav. Contrib.	Estimated	Actual	Goal
Retirement			
College			
Savings			
Subtotal			
Loan Pmt	Estimated	Actual	Goal
Credit Card			
Credit Card			
Credit Card			
Vehicle			
Student Loan			
Leins / Judges.			
Subtotal			
Other Pmts	Estimated	Actual	Goal
Child Support			
Alimony			
Medical Debt			
Subtotal			
Total Exps.			

Assets	Bal. / Value	Amt. Owed
Checking Acc		
Savings Acc		
Retirement		
Auto		
Subtotal		
Total Assets		

Front End: _____ Back End: _____ Debt: _____ Ideal Housing: _____



Disclosure

NEDCO provides a wide-range of services, education, counseling, and financial products including but not limited to, ABCs of Homebuying, Threshold, Default Intervention education and counseling, down payment assistance when available, individual development accounts, affordable homes for rent or purchase, and lender/realtor referral lists.

NEDCO receives funding from a variety of sources (updated 4/15/2011):

- Allstate Foundation
- Duncan & Brown LLC
- HomeStreet Bank
- HUD
- Meyer Memorial Foundation
- NFMC
- Oregon Association of Realtors
- Oregon Community Foundation
- Oregon Housing and Community Services
- Pacific Source
- US Bank
- Wells Fargo

I/We acknowledge that I am/we are under no obligation, and am/are not required, to utilize any program or assistance which is available from NEDCO or NEDCO's partners. My/Our participation in any one program does not obligate me/us to participate in another, although I am/we are welcome to do so if I/we choose. I/We further understand that my/our participation in NEDCO counseling activities does not in any way obligate me/us to use NEDCO referred lenders, realtors, or other partners, or to purchase any NEDCO real estate, business services or products.

Applicant: Printed Name	Signature	Date
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Co-Applicant: Printed Name	Signature	Date
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Default Intervention Counseling Agreement

1. I/We understand that NEDCO provides foreclosure intervention counseling and will advise me/us regarding my/our options to avoid foreclosure. I/We further understand that NEDCO can in no way prevent the lender from exercising their contractual right to foreclose on my/our property.
2. I/We understand that NEDCO cannot act or advise in my/our best interests without full disclosure from me/us about my/our finances and previous agreements with my/our lender.
3. I/We understand that NEDCO's foreclosure intervention counselors will assess my/our expenses, income and spending and make recommendations accordingly. These recommendations will be based on NEDCO's experience of lender programs and NEDCO will not enter into negotiations with the lender for a work-out plan that, according to their best knowledge, is not viable and sustainable. However, I/we may choose to attempt such negotiations on my/our own.
4. I/We understand that my foreclosure intervention counselor is not an attorney and cannot give me/us legal advice, but may recommend that I/we seek the advice of an attorney.
5. I/We understand that NEDCO receives funds through HUD (Housing and Urban Development) and NFMC (the National Foreclosure Mitigation Counseling program), and, as such, is required to share some of my/our personal information with HUD and NFMC program administrators, or their agents, for purposes of program monitoring, compliance and evaluation. I/We give permission for HUD and NFMC program administrators and/or their agents to follow up with me/us between now and three years from the termination/completion of services with NEDCO for the purposes of program evaluation.
6. I/We understand that my/our foreclosure intervention counselor's recommendations are just that, and I/we maintain full responsibility for all financial decisions that I/we make based on their recommendations.
7. I/We agree to open all of my/our mail and communicate with my/our servicer as needed. I/We will also inform NEDCO about updates and timelines given to me/us by my/our lender.
8. I/We agree to keep all appointments made with NEDCO, or to give 24 hour notice if cancelling. I/We also agree to supply all documentation requested by NEDCO at each appointment.
9. I/We agree to notify NEDCO if I/we move from the house, enter into an agreement with my/our lender, or decide to discontinue working with NEDCO.

Applicant: Printed Name	Signature	Date
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Co-Applicant: Printed Name	Signature	Date
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