

1619 Paramount Blvd. Montebello, Ca 90640 (323) 722-3955

FORECLOSURE PREVENTION

$\frac{\textbf{MONTEBELLO HOUSING DEVELOPMENT CORPORATION}}{\textbf{APPLICATION CHECKLIST}}$

Please	be sure to provide the following items:	
	Copies of paycheck stubs for all applicants for the last 30 da	ays
	Copies Last Year Filed Federal Tax Returns (1040), and W-	2
	Verification of other household (Valid Identification)	
	Copies of past two (2) months bank statements	
	Copies of Current mortgage statements	
	Copies Current Loan Documents	
	Copies of Correspondence from Mortgage Company	
	Copies of Property taxes, insurance statements	
	Copies of Utility bill with your name and address (current) a bills	and all other household
	Budget	
	Client Authorization signed and dated	
	_ Hardship Letter	
	please call to make an appointment once you have collected information at (323) 722-3955	all the required
Applic	cation received by:	Date:

MONTEBELLO HOUSING DEVELOPMENT CORPORATION FORECLOSURE PREVENTION APPLICATION

INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED RELEASE and APPROVAL TO PROVIDE VERIFICATION

rsonal Information				
1. Applicant(s) legal na	$\frac{1}{\text{(First)}}$)	(Last)	
	(First)	(Last)	
2. Applicant(s) current		,	(Zust)	
(Street)		(City)		(Zip code)
		Applicant		Co-applicant
3. Telephone numbers	Home:			
	Work:			
	Cell/Mess:			
	Cell/Mess: Email			
4. Social Security Num	Email			

MONTEBELLO HOUSING DEVELOPMENT CORPORATION EMPLOYMENT DATE AND BUDGET SHEET

Demographics					
Marital Status Circle One	e: Marri	ed Single Divorc	ce Widowed		
Education Circle One:	College Vocational	_	High School/GED		
Race Circle One:	Hispanic White	Asian Black Non-Hi Chose not to respond	-		
Gender: Circle One:	Female Ma	ale			
Would you like be place	d on our maili	ng list? Yes or No			
Are you a veteran or acti	Are you a veteran or active in the military? Yes or No				
6. Eligibility Criteria					
Gross Household Income for the combined household			tal annual income before taxes mation will be verified.		
APPLICANT:					
NAME:					
(Last)		(First)	(M.I.)		
EMPLOYER:					
ADDRESS:					
(Street	t)	(City)	(Zip code)		
TELEPHONE:					
OCCUPATION:					
Length of Employment:	Years Mon	ths Monthly Gross Inco	ome: \$		

NAME:		(F' ()	() ()
(Last)		(First)	(M.I.)
EMPLOYER:			
ADDRESS:			
ELEPHONE:	(Street)	(City)	(Zip code)
CCUPATION:			_
DDRESS:(Street)			
(Street)		(City)	(Zip code)
7. Family			
Name	Relation	nship to Applicant	Age

8. TOTAL MONTHLY GROSS INCOME:

Applicant: \$	Co-applicant:	\$
OTHER MONTHLY	INCOME:	
SOURCE of INCOM	<u>E</u> APPLICANT	CO-APPLICANT
Interest from CD's		
Social Security		
Unemployment		
Interest from Savings		
Child Support		
Foster Care		
Pension		
Alimony		
AFDC		
Other		
TOTAL		



CLIENT AUTHORIZATION FOR HOME COUNSELING AGENCY

I would like to participate in your counseling sessions to help improve my housing situation. I understand that my home counselor may discuss information about my credit history, financial situation, employment and other information with me, and with other representatives of financial institutions, or agencies, as necessary to assist me in improving my housing situation. I understand that information about my personal circumstances will be treated as totally confidential and that NO information about me will be discussed with anyone not directly involved in our efforts to improve my housing situation.

I hereby authorize my home counselor to discuss any information related to my personal circumstances that may be necessary in our attempts to improve my housing situation, and to release and/or obtain credit, financial, employment and other information to and/or from other agencies or financial situations when disclosing this information is essential to the improvement of my housing situation.

I hereby authorize Montebello Housing Development Corporation to submit client level information to the DCS grant and allow NFMC to open files to be reviewed for program monitoring and compliance purposes and to allow NFMC to conduct follow-ups for program evaluation.

It is expressively understood that it is my option to work with the real estate agent and/or lender and/or attorney and/or other representative(s) of my choosing, and the home counseling agency will work with such representative in assisting me to improve my housing situation.

It is further understood that in consideration of the home counseling agency's assistance with my housing situation I agree to hold harmless the home counseling agency and its agents and/or employees from any and all claims caused of actions arising. Or which may arise, from mistakes, errors or omissions in regards to said counseling.

I/We hereby authorized Montebello Housing Development Corporation (MHDC) to verify my/our past and present employment earnings records, bank accounts, stock holdings, and any other asset balances that are needed to process a mortgage loan application. I/We further authorize (MHDC) to orders a consumer credit report and verify other credit information, including past present mortgage and landlord references. It is understood that a photocopy of this form will also serve as authorization.

Applicant Signature			Date
Co-Applicant			Date
Applicant Address	City	State	Zip Code

Client:		Loan #
Monthly Income		Loan #
Net Salary		\$
Net Salary		\$
Other		\$
Other (Social Security, Child Support, et)		\$
TOTAL INCOME	_	
M. All E	_	\$
Monthly Expenses		
Mortgage		\$
Food		\$
Electric Bill		\$
Gas Bill		\$
Water Bill		\$
Trash		\$
Gardner/ Pool Services		\$
Insurance (Car, house, life)		\$
HOA		\$
Car Payment		\$
Credit Card Payment		\$
Child Care		\$
Clothing		\$
School/ work supplies		\$
Transportation (gas, bus, fare, etc)		\$
Tuition		\$
Savings		\$
Phone Bill		\$
Other Bills (cable, internet, etc.)		\$
Medical expenses		\$
Alimony/ Child support		\$
Entertainment (movies, restaurants, video		
rentals, etc)		\$
Property Taxes		\$
Total Expenses		
(add all monthly expenses)		\$
TOTAL	TOTAL EXPENSES	\$ = \$

If your TOTAL EXPENSES are bigger than your TOTAL INCOME concentrate on cutting your spending and reducing the debt.

Borrower Authorization Release Form

		
Part I – General Information		
1. Borrower	2. Name and address	of Lender/Broker
3. Loan Number	4. Date	
Part II – Borrower Authorization		
My/our signature below authorizes and he	reby releases any and all inform	nation related to the
loan number above to Montebello Housing	· ·	
present employment earnings records, ban	=	
balances that are needed to process my mo		•
Development Corporation to speak on my		
a copy of this form will also serve as author		
1		
Property Address	Last 4 digits to SS#	
110p010y 12002000	Zust i digita to sen	
Borrower Signature	Date	<u></u>
,		
Borrower Signature	Date	
	/	
Montebello Housing Development Corpora	tion	
Vera Morales Victor Burrola Ma	x Cabellos Daniel Guzman	Hilton Cermeno
Housing Counselor NCLR	NCLR NCLR	NCLR
Trousing Counselor TVCLK	NCLK NCLK	NCLK
Renee Chavez Juan Rivera	Sergio Hernandez	
Housing Counselor Housing Counselor	Housing Counselor	
Troubing Counselor	Troubing Countries	
1619 Paramount Blvd.	WARNI OF	
Montebello, Ca 90640	38 11 a 11 TO	AIOT D
·	2055	NCLR
Phone (323) 722-3955 Fax (323) 722-	·3733 %_ <i>§</i>	



CREDIT CHECK CONSENT

I, the undersigned consumer, direct Montebello Housing Development Corporation, to obtain a copy of my credit report This consent shall automatically expire thirty (30) days from the date of my signature below.

Printed Name	
Social Security Number	Date of Birth
Address	
Signature/Date	
Printed Name	
Social Security Number	Date of Birth
Signature/Date	

MONTEBELLO HOUSING DEVELOPMENT CORPORATION FORCLOSURE PREVENTION Questionnaire

The second signature line is only to be used when ordering a joint credit report for a married couple. If more than one individual credit report is being ordered, use a separate Credit Check Consent form for each customer

tome	1.
1.	Have you considered selling your property to avoid foreclosure? If you have not considered selling, please indicate why you want to keep the property.
2.	Are you prepared to take whatever action or options is necessary to try to preserve you homeownership and/or your credit?
3.	Did anyone contact you offering assistance to modify your mortgage, either directly by telephone, or by other means such as by mail or a flyer?
4.	Were you guaranteed a loan modification or asked to do any of the following; pay a fee, sign a contract, redirect mortgage payments, sign over title to your property, or stop making loan payments?
5.	Will you be willing to share your story to the Media.

MONTEBELLO HOUSING DEVELOPMENT CORPORATION Mortgage and Loan Information

INFORMATION ABOUT HOMEOWNERS PROPERTY

Names of all Owners on Title/ Loan
Owners:
Owners:
Co-owners:
Year Purchased:
Original Purchase Price:
Number of Rooms:
Owner Occupant? Yes No
Multi-Family Home? Yes No Name of tenants Rent received \$
Number of Loans/ Mortgages
1 ^{st:}
2 ^{nd:} —————
3 ^{rd:} —————
4 th :
Taxes Inusurances Impounded
Yes No
If no, Current on Taxes and Insurance Yes No
¢

Other Liens:

REASON FOR DEFAULT/DELIQUENCY

MORTGAGE

Type of Mortgage
Purchase Money Refinance Home Equity Loan Debt Consolidation Other Has client brought original loan papers Yes No
Investor/Insurer
FHA Insured VA PHS Fannie Mae Freddie Mac PMI Other
Term of mortgage (in months)
Interest Rate
Principal and Interest Payment (monthly)
Tax and Insurance Payment (monthly)
Total Monthly Payment
Months Behind
Total arrears including costs



Montebello Housing Development Corporation Foreclosure Mitigation Counseling Agreement

- 1. I understand that Montebello Housing Development Corporation 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 Montebello Housing Development Corporation 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 follow-up with me within the next three years for the purposes of program evaluation.
- 4. I acknowledge that I have received a copy of Montebello Housing Development Corporation's Privacy Policy.
- 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 Montebello Housing Development Corporation provides information and education on numerous loan products and housing programs and I further understand that the housing counseling I receive from Montebello Housing Development Corporation in no way obligates me to choose any of these particular loan products or housing programs.

Client's signature	Date
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Montebello Housing Development Corporation's Privacy Policy

Montebello Housing Development Corporation 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 Foreclosure Mitigation 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 applications or other forms, such as your name, address, social security number, assets, and income;
- Information about your transactions with us, your creditors, or others, 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

- 1. 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.
- 2. 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 323-722-3955 and do so.

Release of your information to third parties

1. 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 which make our services possible.	requirement of grant awards
2. We may also disclose any nonpublic personal information ab anyone as permitted by law (e.g., if we are compelled by legal p	,
3. Within the organization, we restrict access to nonpublic pers those employees who need to know that information to provid physical, electronic and procedural safeguards that comply with your nonpublic personal information.	e services to you. We maintain
Client's signature	Date

Client's signature _____ Date ____