

## **FHCS Foreclosure Intervention Program Client Intake Form**

Please complete the information below to the best of your ability. If you do not have the information, please leave the question blank. After reviewing your completed forms, we will assist you in identifying any additional information needed.

Contact Information					
First Name(1):(1 = Primary Borrower)	Middle	e Initial(1):	Last Name(	(1)	
First Name(2):(2 = Co-Borrower)	Middle	e Initial(2):	Last Name(	(2)	
Borrower Signature		Co-bo	rrower Signatur	e	
Street Address:			Apt, P.O. #_		
City:	State:	Zip Code:		County:	
Home Phone:	Work Phone:		Cell Phone:	<b>:</b>	
Email Address(es):					
Prir	mary Borrower's I	Personal Demo	graphic Info	ormation	
Ethnicity/Race (Check all the		Gender	-	Marital Status	
☐ American Indian or A	laskan Native	□ Female		☐ Single	
☐ Asian		☐ Male		☐ Married	
☐ Black or African-Ame	rican			☐ Divorced	
□ Caucasian		Age:	=	☐ Widowed	
☐ Hispanic		Date of Birth:			
☐ Native Hawaiian or P	acific Islander	Place of Birth:			
$\square$ Information not provide	ded	Social Security #	:		
	co-Borrower's Per	rsonal Demogra	aphic Inforr	mation	
Ethnicity/Race (Check all the		Gender	_	Marital Status	
☐ American Indian or Alaskan Native		□ Female		□ Single	
□ Asian		□ Male		□ Married	
☐ Black or African-American		Age:		□ Divorced	
□ Caucasian		Date of Birth:		□ Widowed	
☐ Hispanic		Place of Birth:			
□ Native Hawaiian or Pacific Islander		Social Security #:			
☐ Information not provide	ded	Relationship to h	omeowner:		
	Fir	nancial Summa	ry		
Household Type (Check all	that apply)	Gross	and Net Housel	hold Family Income	
☐ Single Adult					
☐ Female-headed singl	e parent household	Yearly	Gross \$	Net \$	
☐ Male-headed single p	parent household				
☐ Married without dependants		Month	ly Gross \$	Net \$	
☐ Married with dependa	ants				
☐ Two or more unrelated adults		Family	y Size		
☐ U.S. Veteran		# Depo	endants		
☐ Someone in househo	old is over the age of 62	Ages	of Dependants:		
□ Other			ependants disab	oled? □ Yes □ No	

## PLEASE SEE REVERSE SIDE FOR ADDITIONAL INFORMATION

Employment						
Primary Borrower:						
Employer:	Title:	Self Employed				
Phone: Net Monthly I	Net Monthly Income: \$ Years in profession: Hire d					
Co- Borrower:						
Employer:	Title:	Self Employed				
Phone: Net Monthly Income: \$ Years in profession: Hire date://						
Mortgage Information						
Name of <u>Original</u> Lender		Second Mortgage Lender:				
Original Loan Number		(If applicable) Second Mortgage Loan Number:				
Current Total Monthly Payment		Second Mortgage Monthy Payment \$				
(PITIA: Principal, Intererest, Taxes, Insurance, Asse		Second Mortgage Amount Delinquent: \$				
First MortgageTotal Amount Delinquent	\$	Second Mortgage Balance Remaining: \$  Have you been given a modification in the past that you were not able to keep current? Y N  Are you in a trial modification at this time?  Y N				
First Mortgage Balance Remaining \$						
Thist wortgage balance itemaning \$						
Name of <u>Current</u> Lender/Servicer						
Loan # assigned by Current Servicer		Have you been denied a modification? Y N				
If current loan is an ARM (Adjustable Ra interest rate reset? Y N	te Mortgage), has the	Are you still living in the house? Y N (Lenders will not offer workouts to borrowers who have abandoned the property.)				
Have you received a foreclosure notice?		Have you filed for bankruptcy? Y (Ch 7 or 13?) N				
□ Yes □ No		If so, bankruptcy dicharge date://				
What is your "best estimate" of your	home's <u>present</u> valu	ue?				
How long have you owned your house? years.						
Is your loan owned or securitized by	r: Fannie Mae?* yes	s no Freddie Mac?* yes no				
*To find out if your loan is owned or securitized by Freddie Mac or Fannie Mae, contact your lender at the customer service number found on your mortgage statement or go to: <a href="https://www.freddiemac.com/avoidforeclosure">www.freddiemac.com/avoidforeclosure</a> or call 1-800-FREDDIE. For Fannie Mae go to <a href="https://www.fanniemae.com/homeaffordable">www.fanniemae.com/homeaffordable</a> or call 1-800-7FANNIE. <a href="https://www.fanniemae.com/homeaffordable">Please check!</a>						
Type of First Loan Product at Intake	<b>Current Loan Status</b>	Primary Reason for Default				
□ Fixed less than 8%	□ Current	(Check <u>ONLY</u> one)				
□ Fixed 8% or more than 8%	□ 30-60 days late	□ Reduction In Income				
□ ARM less than 8%	□ 61-90 days late	□ Poor Budget/Management skills				
□ ARM 8% or more than 8%	□ 91-120 days late	□ Loss Of Income				
□ Hybrid ARM (2/28 or 3/27)	□ 120 + days late	□ Medical Issues				
□ Option ARM	□ Unknown	□ Increase in Expenses				
□ Other:		□ Divorce/ Separation				
□ Unknown		<ul><li>□ Death of Family Member</li><li>□ Failed Business Venture</li></ul>				

For more information on the President's Refinance/Modification Home Affordability Program go to <a href="https://www.financialstability.gov">www.financialstability.gov</a>. For information abou the Ohio Hardest-Hit Fund, visit <a href="https://www.savethedream.ohio.gov">www.savethedream.ohio.gov</a>.