



Please Complete this Form & Bring it With You

Homeownership Solutions 2009

June 20, 2009 10AM-3PM Suitland Elementary School

4650 Homer Avenue, Suitland, MD

Client Profile

Name: _____ **Co-borrower:** _____
 Age: _____ Gender _____ Age _____ Gender _____
 Race: _____ Hispanic? _____ Race _____ Hispanic? _____

Property Address: _____

Current Address: _____
 (if different from above)

Phone: wk: _____ home: _____ cell: _____

Email: _____

Best time to contact you? _____

How did you hear about us? _____

Household Single _____ Single parent female-head _____
 Single parent male-head _____ Married without children _____
 Married with children _____ Two or more unrelated adults _____
 Other (please describe) _____

Household Income: \$ _____

Loan Information

Lender _____
Have you been in contact with your lender? Y N Uncertain
 Interest Rate : _____ Current Payment: _____ Has Your Loan been Modified?
 Property Value (if known): _____ Yes No
 2nd Mortgage Payment/HELOC (if any): _____

What is your concern?

please check

Late payments: _____

Refinance: _____

Reset: _____ Reset Date: _____

Please only answer the following if your loan is delinquent:

How many months are you behind on your mortgage payment? _____

What caused you to be late/delinquent? _____

Have you ever been on a mortgage repayment plan? _____

Total Net Monthly Income:

| Liabilities & Expenses | Current |
|--|---|
| Property Taxes, Insurance, Home Owner Association Dues | \$ _____ |
| Auto Loan (circle one) 1 auto 2 auto 3+ | Monthly payment per vehicle (1) \$ (2) \$ (3) \$ |
| Auto Expenses (insurance, gas, maintenance, etc.) | \$ _____ |
| Transportation (mass transit fees/bus passes) | \$ _____ |
| Debts | \$ _____ |
| Utilities | \$ _____ |
| Telephone/Cellular phone | \$ _____ |
| Cable/Satellite Dish | \$ _____ |
| Groceries/Household Supplies | \$ _____ |
| Childcare | \$ _____ |
| Medical Expenses | \$ _____ |
| Clothing | \$ _____ |
| Spending Money | \$ _____ |
| Miscellaneous (please describe) | \$ _____ |
| TOTAL MONTHLY EXPENSES | 0 |
| Difference - income v. expenses: | \$ _____ |