



National Foreclosure Mitigation Counseling

OFFICIAL INTAKE FORM

Personal Information: *In order to process your case, please print legibly in ink. Answer questions 7 – 40*

7. First Name: _____ 8. Last Name: _____

9. Age: ____ Birth Date _____

10. Race: (circle one) 0 = American Indian/Alaskan Native, 1 = Asian, 2 = Black or African American,
3 = Native Hawaiian/Other Pacific Islander, 4 = White, 5 = American Indian/Alaskan Native & White,
6 = Asian and White, 7 = Black/African American and White,
8 = American Indian/Alaskan Native and Black/African American, 9 = Other

11. Ethnicity: Is client's ethnicity Hispanic? (circle one) 0 = No 1 = Yes

12. Gender: (circle one) 0 = Female 1 = Male 13. Head of Household: (circle one) 1 = Single adult,
2 = Female-headed single parent household, 3 = Male-Headed single parent household, 4 = Married without dependants,
5 = Married with dependants, 6 = Two or more unrelated adults, 7 = Other

14. Household Family Income (yearly): _____

16. House Number: _____ 17. Street: _____ 18. City: _____ 19. State: ____ 20. Zip: _____

23. Name of Originating Lender: _____ 25. Original Loan Number: _____

26. Current Servicer: _____ 28. Loan Servicer Number: _____

31. Total Monthly PITI at Intake: _____

32. Type of First Loan Product at Intake: (circle one) 1 = Fixed rate currently under 8%, 2 = Fixed rate currently 8% or greater
3 = ARM currently under 8%, 4 = ARM currently at 8% or greater, 5 = Other

33. Interest Only Loan: (circle one) 0 = No, 1 = Yes 34. Hybrid ARM: (circle one) 0 = No, 1 = Yes

35. Option Arm: (circle one) 0 = No, 1 = Yes 36. VA or FHA Insured: (circle one) 0 = No, 1 = Yes

38. Has Interest Reset on ARM?: (circle one) 0 = No, 1 = Yes,

39. Primary Reason for default: (circle one) 1 = Reduction in income, 2 = Poor budget management skills,
3 = Loss of income, 4 = Medical issues, 5 = Increase in expenses, 6 = Divorce/Separation, 7 = Death of family member,
8 = Business venture failed, 9 = increase in loan payment, 10 = Other

40. Loan status at first contact: (circle one) 1 = Current, 2 = 30-60 days late, 3 = 61-90 days late,
4 = 91-120 days late, 5 = 121+ days late

To be completed by Counselor:

2. Branch ID: _____ **3. Client Unique Identifier:** _____

4. Counseling Level: (circle one)

1 = Level 1 counseling session completed by organization

2 = Level 2 counseling completed by organization during a later reporting period then level 1 counseling session OR level 2 completed by another (different) organization.

3 = Level 1 AND Level 2 counseling sessions completed by org. and reported on during the same production upload.

6. Counseling Mode: *always 2 = face-to-face* **15. Household Income Category: (circle one)** *A = less than 50% of AMI, B = 50 - 79% of AMI, C = 80 - 100% of AMI, D = greater than 100% AMI*

21. Total Individual foreclosure hours received: _____, **22. Total group foreclosure hrs. received:** Always 0

24. FDIC/NCUA # or Mortgage Company Name (if available): _____

27. FDIC/NCUA # or Current Servicer name (if # not available): _____

29. Credit score: _____ **30. Source of Credit score:** Always Tri-merge.

37. Privately Held Loan: Is the loan privately held? (circle one) *0 = No, 1 = Yes*

41. Counseling Outcome: (circle one)

1 = Brought Mortgage Current

2 = Initiated Forbearance Agreement/ Repayment Plan

3 = Executed a Deed-in-lieu

4 = Sold property/chose alternative housing solution

5 = Mortgage Foreclosed

15 = Mortgage Refinanced

16 = Mortgage Modified

17 = Received Second Mortgage

18 = Currently Receiving Foreclosure Prevention / Budget Counseling

20 = Other

51 = Pre-foreclosure sale

52 = Counseled and referred to another social service or emergency assistance agency

53 = Obtained partial claim loan from FHA lender

54 = Bankruptcy

55 = Entered debt management plan

56 = Counseled and referred for legal assistance

57 = Withdrew from counseling

42. Counseling Outcome Date: (enter date in the DD/MM/YYYY format): _____

To be Completed and signed by client

I hereby authorize and instruct Spanish Coalition for Housing (hereinafter SCH) to obtain and review my credit report by signing this form and giving you my information. My credit report will be obtained from a credit-reporting agency chosen by SCH. I understand and agree that SCH intends to use the credit report for the purpose of evaluating my financial readiness to purchase a home or refinance my current loan.

Signature: _____ **SS#** _____ **Date:** _____

Co-Signature: _____ **SS#** _____ **Date:** _____