



OFFICE LOCATIONS:

- 10533 W National Ave, Ste 300, West Allis, WI 53227 Phone- 414-727-5700 Fax - 414-727-5701
217 Wisconsin Ave, Ste 124, Waukesha, WI 53186 Phone - 262-522-1230 Fax - 262-522-1233
218 Wisconsin Drive, Jefferson, WI 53549 Phone - 920-674-5611 Fax - 920-674-5631
\*Spanish\* 614 W National Ave, Ste 206, Milwaukee, WI 53204 Phone - 414-384-3700 ext 334 Fax - 414-384-4976

Intake Date Client ID

\*\*\*\*\*

1. Client Information

Applicant:

Address: Street City State Zip Code

County: Email Address

Home Phone: Cell Phone: Work Phone:

Gender: Male Female Birthdate: Social Security Number:

Disability: Yes No Born in United States: Yes No Country of Original

Veteran: Yes No Highest Level of Education

Race: American Indian/Alaskan Native Asian Black/African American Native Hawaiian
American Indian Asian and White Black/African American and White White
American Indian/Alaskan Native and Black/African American

Ethnicity: Not Hispanic or Latino Hispanic or Latina

Household Type: Married without dependants Married with dependents two or more unrelated adults
Female headed single parent household Male headed single parent household single adult

Employer Name Start date of Employment

Address Phone Number

Number of Hours worked per week Rate of Pay Hourly Weekly Bi-weekly

Co-Applicant:

Address: County:

Home Phone: Cell Phone: Work Phone:

Gender: Male Female Birthdate: Social Security Number:

Disability: Yes No Born in United States: Yes No Country of Original

Veteran: Yes No Highest Level of Education



Name of Co-owners if different than above: \_\_\_\_\_

Year Purchased: \_\_\_\_\_ Original Purchase Price: \_\_\_\_\_ Estimated Value \_\_\_\_\_

#### **4. Mortgage Information**

##### **Mortgage One**

Originating Lender \_\_\_\_\_ Loan Number \_\_\_\_\_

Contact information: \_\_\_\_\_

Current Servicer \_\_\_\_\_ Loan Number \_\_\_\_\_

Contact information: \_\_\_\_\_

Type of Loan:  Fixed rate under 8%  Fixed rate over 8%  ARM under 8%  ARM over 8%

FHA Loan:  Yes  No VA Loan:  Yes  No

Current Interest Rate: \_\_\_\_\_ if adjustable rate, when will it reset: \_\_\_\_\_

Loan Status:  Current  30-60 days late  61-90 days late  91-120 days late  121+ days late

Reason for Default:  Reduction in Income  Loss of Income  Medical Issues  Increase in Expenses  
 Divorce/Separation  Death of Family Member  Increase in Loan Payment  
 Poor Budget management Skills  Other, \_\_\_\_\_

Have you made an effort to arrange a workout on your own?  Yes  No

Results \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

##### **Mortgage Two**

Originating Lender \_\_\_\_\_ Loan Number \_\_\_\_\_

Contact information: \_\_\_\_\_

Current Servicer \_\_\_\_\_ Loan Number \_\_\_\_\_

Contact information: \_\_\_\_\_

Type of Loan:  Fixed rate under 8%  Fixed rate over 8%  ARM under 8%  ARM over 8%

FHA Loan:  Yes  No VA Loan:  Yes  No

Current Interest Rate: \_\_\_\_\_ if adjustable rate, when will it reset: \_\_\_\_\_

Loan Status:  Current  30-60 days late  61-90 days late  91-120 days late  121+ days late

Reason for Default:  Reduction in Income  Loss of Income  Medical Issues  Increase in Expenses  
 Divorce/Separation  Death of Family Member  Increase in Loan Payment  
 Poor Budget management Skills  Other, \_\_\_\_\_

Have you made an effort to arrange a workout on your own?  Yes  No

Results \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

	1 <sup>st</sup> Mortgage	2 <sup>nd</sup> Mortgage
Monthly Principal & Interest Payment		
PMI Payment		
Monthly Property Tax Escrow		
Monthly Property Insurance Escrow		
Total Monthly Payment		
Total Arrears Including Costs		
Current Principal Balance		
Payoff Amount		

Have you contacted another agency such as HBC Services for help in solving your mortgage issues?  Yes  No

If yes, what agency and when? \_\_\_\_\_

### **5. Payments on Debt**

Creditor	Type	Monthly Payment	Balance
	1 <sup>st</sup> Mortgage		
	2 <sup>nd</sup> Mortgage		
	Car Loan		
	Car Loan		
	Credit Card		
	Credit Card		
	Store Card		
	Personal Loan		
	Pay Day Loan		
	Other		
	Other		
Real Estate Taxes	Back Bills		
Medical	Back Bills		
Utilities	Back Bills		
	Total Payments		

#### **Other Important Debt Issues**

Wage Garnishments Pending:  Yes  No If yes, explain \_\_\_\_\_

Court Cases Pending:  Yes  No If yes, explain \_\_\_\_\_

Tax Debts:  Yes  No If yes, explain \_\_\_\_\_

Car Loan Defaults or Repossessions:  Yes  No Utility Shut-Offs:  Yes  No

Bankruptcy Ever Filed:  Yes  No If Yes, When? \_\_\_\_\_

\_\_\_\_\_  
Signature and Date

\_\_\_\_\_  
Signature and Date

TO BE COMPLETED BY COUNSELOR:

Lew Ameal       Rocio Juarez       Sarah Steelman

Counseling Level:  Level 1 – Counseling Session completed by organization  
 Level 2 – Counseling Session completed by organization during a later reporting period  
 Level 1 and Level 2 Counseling Services completed by organization and reported on during  
The same production update

Counseling Mode:  Phone  
 Face to Face  
 Internet  
 Video Conference  
 Other

Counseling Intake Date: \_\_\_\_\_

Counseling Outcome Date: \_\_\_\_\_

Counseling Outcome:  Brought Mortgage Current       Initiated Forbearance Agreement/Repayment Plan  
 Executed Deed-in-Leo       Sold Property/Choose alternative housing solution  
 Mortgage Foreclosure       Entered debt management plan  
 Mortgage Refinanced       Mortgage Modified  
 Received second mortgage       Other  
 Pre-foreclosure sale       Bankruptcy  
 Counseled and referred to another social service or emergency agency  
 Currently receiving foreclosure prevention/budget counseling  
 Obtained partial claim loan from FHA lender  
 Counseled and referred for legal assistance  
 Withdrew from counseling

Total Individual Foreclosure Counseling Hours Received: \_\_\_\_\_

Total Group Foreclosure Counseling Hours Received: \_\_\_\_\_

Entered into HCO  
 Entered into WHEDA  
 Entered into Service Point