

## Documents Needed for Foreclosure Appointment

1. Intake application (attached)
2. Detailed list of all monthly expenses (budget template attached)
3. Credit Report Authorization (attached)
4. Proof of income for the last 2 months / most recent benefit statements
5. Two most recent bank statements, all pages
6. All recent household bills including utility, water, gas, cable, phone, etc.
7. Recent mortgage statement (if applies)
8. Proof of life-time rights if not on deed/mortgage
9. Picture ID

Please return all documents to our office in person once ALL DOCUMENTS are ready to be reviewed. The counselor will reach out to you to schedule an appointment to come in to meet with her in person.

Feel free to contact us if you have any questions.

(336) 236-1675

We look forward to working with you.

**HUD CERTIFIED HOUSING  
COUNSELING AGENCY**

**Financial Literacy  
Homebuyer Education  
Down Payment Assistance  
NCHFA Community Partners Loan Pool  
NCHFA Urgent Repair Program  
Foreclosure Prevention Assistance**

**EDUCATE, EMPOWER AND AFFIRM**



**Home Solutions of Davidson County  
21 W. Second St.  
Lexington, North Carolina 27292  
336.236.1675  
[Homesolutionsdcnc.org](http://Homesolutionsdcnc.org)**



**CLIENT PROFILE**

**Lexington\_\_Thomasville \_\_**

**GENERAL INFORMATION**

*Date*

Name Social Security # Date of Birth

Co-Borrower/Spouse Name Social Security # Date of Birth

Address City State Zip-code

Phone # (Home) Phone # (Work)

Co-Borrower/Spouse Phone # (Home) Phone # (Work)

Marital Status: Married\_\_ Legally Separated\_\_ Divorced\_\_ Widowed\_\_ Single\_\_

Dependents:

Name/Age	Name/Age
Name/Age	Name/Age
Name/Age	Name/Age
Name/Age	Name/Age

**RESIDENTIAL INFORMATION**

Name of Current Landlord/ Loan Servicer

Address of Current Landlord

Monthly **rent** payment \$\_\_\_\_\_ Utilities \$\_\_\_\_\_ Time lived at above address \_\_\_\_\_

If less than two years previous address:

Previous Address City/State/Zip-code Dates

Are you currently residing in public housing? Yes \_\_\_\_\_ No \_\_\_\_\_

Section 8 Voucher Yes \_\_\_\_\_ No \_\_\_\_\_ Amount Subsidized \$ \_\_\_\_\_

Are you currently participating in any self-sufficiency program such as Family Self-Sufficiency? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, name of program & agency: \_\_\_\_\_

Date entered program \_\_\_\_\_ FSS Action Plan on File Yes \_\_\_\_\_ No \_\_\_\_\_

Revised 09/16/2021

**EMPLOYMENT AND INCOME**

**Applicant's Income:** Hourly rate: \$ \_\_\_\_\_ Week \$ \_\_\_\_\_ Semi-Monthly \$ \_\_\_\_\_  
Bi-weekly \$ \_\_\_\_\_ Monthly \$ \_\_\_\_\_ Annual \$ \_\_\_\_\_

Employer: \_\_\_\_\_

Employer Address: (Personnel Department) \_\_\_\_\_

Hours per week \_\_\_\_\_ Length of time at Current Employment \_\_\_\_\_

If less than two years, previous employment:

Previous Employment	Dates of Employment
Address of Previous Employer	City/State Zip-code

**Co-Owner/Spouse Income:**

Applicant's Income: Hourly rate: \$ \_\_\_\_\_ Week \$ \_\_\_\_\_ Semi-Monthly \$ \_\_\_\_\_  
Bi-weekly \$ \_\_\_\_\_ Monthly \$ \_\_\_\_\_ Annual \$ \_\_\_\_\_

Employer: \_\_\_\_\_

Employer Address: (Personnel Department) \_\_\_\_\_

Hours per week \_\_\_\_\_ Length of time at Current Employment \_\_\_\_\_

If less than two years, previous employment:

Previous Employment	Dates of Employment
Address of Previous Employer	City/State Zip-code

**Other Income Sources:**

Other Employment (Part-Time, etc.) \$ \_\_\_\_\_

Child Support Received Monthly \$ \_\_\_\_\_

Social Security/Disability/Pension: Amount: \$ \_\_\_\_\_ Source: \_\_\_\_\_

Other: \$ \_\_\_\_\_ Source: \_\_\_\_\_

**TOTAL INCOME FROM ALL SOURCES:** Per Month \$ \_\_\_\_\_  
Annual \$ \_\_\_\_\_

**ASSETS AND LIABILITIES**

How many vehicles do you own? \_\_\_\_\_

Vehicle 1 Value \_\_\_\_\_ Loan Balance \_\_\_\_\_

Vehicle 2 Value \_\_\_\_\_ Loan Balance \_\_\_\_\_

First Time Homebuyer Yes No

Do you own a home? Yes No Home Value \_\_\_\_\_ Mortgage Balance \_\_\_\_\_

Do you own any other homes? Yes No Value \_\_\_\_\_ Mortgage Balance \_\_\_\_\_

Do you own a business? Yes No Business Value \_\_\_\_\_ Business Loan Amount \_\_\_\_\_

Do you own rental property or land? Yes No Property Value \_\_\_\_\_ Loan Amount \_\_\_\_\_

Do you own any stocks, bonds, 401K, IRA, or any other investments? Yes No

Stock Value \_\_\_\_\_

Do you have a checking account? Yes No Amount in checking \_\_\_\_\_

Do you have a savings account? Yes No Amount in savings \_\_\_\_\_

Do you have past due household bills? Yes No Amount past due \_\_\_\_\_

Do you have credit card bills? Yes No Credit Card Balance \_\_\_\_\_

Do you have student loans? Yes No Balance \_\_\_\_\_

Do you have medical bills? Yes No Balance \_\_\_\_\_

Do you have any outstanding personal loans? Yes No Balance \_\_\_\_\_

**INFORMATION FOR GOVERNMENT MONITORING PURPOSES**

The following information is requested by the Federal Government for certain types loan applications related to a dwelling, in order to monitor compliance with equal credit opportunity, fair housing and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so.

**EQUAL OPPORTUNITY INFORMATION**

Home Solutions of Davidson County prohibits discrimination on the basis of sex, familial status, race, color, religion, national origin, age or disability. The requested information below is voluntary and failure to supply this information will not affect you as an applicant. The sole purpose of this information is to measure the success of our homeownership funding efforts in reaching all segments of the population, and to comply with the Fair Housing Laws.

**Age Range:**

**Gender:**

18-24

25-34

35-54

55 & Over

Female

Male

**BORROWER**

**CO-BORROWER**

I do not wish to furnish this information

I do not wish to furnish this information

**RACE/NATIONAL ORIGIN:**

**Borrower**

**Co-Borrower**

American Indian

American Indian

Black, Non-Hispanic

Black, Non-Hispanic

White, Non-Hispanic

White, Non-Hispanic

Hispanic

Hispanic

Asian

Asian

Other

Other

**CERTIFICATION**

I certify that all the above information is correct and true to the best of my knowledge. I understand that false or misleading information may be grounds for rejection of my application. I understand that the completion of this form does not guarantee loan approval, eligibility for housing or housing assistance programs.

**Personal Information Release Authorization**

I/we hereby authorize the release of any personal and financial information requested by Home Solutions of Davidson County:

- Rental Verification
- Employment and Income records
- Checking/savings account deposits and balances

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Counselor Signature

\_\_\_\_\_  
Date



# Disclosure Statement

Home Solutions offers both, counseling and workshops in the topics described below.

Counseling is one-on-one sessions with clients to review and assess specific situation.

Workshops are held with more than one participant and cover general information on the specific topic.

## **Pre-Purchase Homeownership Counseling/Workshops:**

- A service to assist individuals in developing a personalized plan that explores options and resources to achieve homeownership. We review all aspects of purchasing a home as well as reviewing their budget, debt and credit reports. The client is provided a copy of the budget and action plan designed to support the goal of homeownership **Non-delinquency Post Purchase Workshop for Homeowners/Workshops:**
- A free service to assist individuals to ensure successful homeownership through effective budgeting, equity preservation, and safeguards to protect their investment. Topics include making mortgage payments a priority, issues of default and foreclosure and loss mitigation. Counseling services are conducted face-to-face or by telephone at the client's request.

## **Pre-Purchase Homebuyer Education Workshops:**

- An 8 hour workshop which addresses the important aspects of the home buying process including; qualifying for a mortgage, the application process, shopping for a home and the closing process. Expert speakers include lenders, realtors, attorneys, home inspectors and HSDC educational staff that discuss budgeting and credit. A certificate of completion is provided to each participant. The workshops are conducted face-to-face.

## **Financial Management/Budget Counseling/Workshops:**

- A free service to assist individuals and families in setting up a monthly budget. HSDC reviews the client's income, credit report, expenses, budget, savings capability and assists in putting together an action plan that meets their needs.

## **Rental Housing Counseling/Workshops:**

- A free service to assist individuals who are looking to rent. HSDC helps clients create a budget and action plan in order to better understand what they can afford. HSDC also educates potential renters about leases and what to expect when becoming a renter. Counseling services are conducted face-to-face or by telephone at the client's request.

## **Services for Homeless Counseling/Workshops:**

- A free service to assist clients with emergency shelter options, transitional housing information, and providing referrals for other programs within our community. Counseling services are conducted face-to-face or by telephone at the client's request.

## **Mortgage Delinquency & Default Resolution Counseling/Workshops:**

- A free service to help homeowners who are past due with their mortgage to determine the options available to avoid foreclosure. HSDC provides its clients guidance in identifying the cause of these problems, their motivation, resources and ability to resolve the problem. HSDC works with the client's and lenders in order to facilitate the communication that will assist with exploring best possible workout options for the homeowner. HSDC refers clients to Consumer Credit Counseling Services for comprehensive counseling to avoid foreclosure through additional programs not offered at HSDC. Counseling services are conducted face-to-face.

## **Home Maintenance and Financial Management for Homeowners/Workshops:**

- Most cases of individuals seeking housing counseling need to undergo financial analysis in order to determine how the client manages his/her money and how the counselor can adequately assist him/her. The counselor will review income and expenses, how clients are spending their money, how a budget is created and credit and its implications. Counselor provides resources based on homeowners needs and may be able to schedule appointments with partner agencies if need. Counseling services are conducted face-to-face or by telephone at the client's request.

## Disclosure Statement

I /We understand that it is my/ our right and responsibility to decide whether to engage in any course of housing counseling with the Home Solutions of Davidson County and determine whether counseling is suitable for my/ our housing problem.

I/We understand that we are not obligated to receive, purchase or utilize any other services offered by Home Solutions of Davidson County y or its exclusive partners, in order to receive housing counseling.

I /We understand that h the Home Solutions of Davidson County as the discretion to charge reasonable fees for some counseling service, and that these fees will be explained to me prior to counseling. I further understand that fees will not be charged if they create a financial hardship and I will not be denied counseling if I cannot pay the fees.

I/ We understand that the Home Solutions of Davidson County CDC provides information on a broad range of housing programs and products and that the housing counseling I receive from Home Solutions of Davidson County in no way obligates me to choose any particular loan product or housing program discussed in my counseling sessions.

I/We understand that Home Solutions of Davidson County does not guarantee that I/we will receive mortgage financing from any lender and/or other mortgage financing entity.

I/We may be referred to other housing services of the organization or to other agencies as appropriate that may be able to assist with particular concerns that have been identified. I understand I am not obligated to use any of the services offered to me.

I/We understand that a counselor may answer questions and provide information but cannot give legal advice. If I want legal advice, I will be referred for appropriate assistance.

I have reviewed and understand the above Counseling Services Disclosure Statement

Client Signature \_\_\_\_\_ Date \_\_\_\_\_

Client Signature \_\_\_\_\_ Date \_\_\_\_\_

Counselor Signature \_\_\_\_\_ Date \_\_\_\_\_





# Make a Budget

Use this worksheet to see how much money you spend this month. Then, use this month's information to help you plan next month's budget.

Some bills are monthly and some come less often. If you have an expense that does not occur every month, put it in the "Other expenses this month" category.

MONTH \_\_\_\_\_ YEAR \_\_\_\_\_

## My income this month

Income	Monthly total
Paychecks (salary after taxes, benefits, and check cashing fees)	\$ _____
Other income (after taxes) for example: child support	\$ _____
<b>Total monthly income</b>	<b>\$ _____ 0.00</b>

Income

## My expenses this month

	Expenses	Monthly total
<b>HOUSING</b>	Rent or mortgage	\$ _____
	Renter's insurance or homeowner's insurance	\$ _____
	Utilities (like electricity and gas)	\$ _____
	Internet, cable, and phones	\$ _____
	Other housing expenses (like property taxes)	\$ _____
<b>FOOD</b>	Groceries and household supplies	\$ _____
	Meals out	\$ _____
	Other food expenses	\$ _____
<b>TRANSPORTATION</b>	Public transportation and taxis	\$ _____
	Gas for car	\$ _____
	Parking and tolls	\$ _____
	Car maintenance (like oil changes)	\$ _____
	Car insurance	\$ _____
	Car loan	\$ _____
	Other transportation expenses	\$ _____



# Make a Budget

	Expenses	Monthly total
<b>HEALTH</b>	Medicine	\$
	Health insurance	\$
	Other health expenses (like doctors' appointments and eyeglasses)	\$
<b>PERSONAL AND FAMILY</b>	Child care	\$
	Child support	\$
	Money given or sent to family	\$
	Clothing and shoes	\$
	Laundry	\$
	Donations	\$
	Entertainment (like movies and amusement parks)	\$
	Other personal or family expenses (like beauty care)	\$
<b>FINANCE</b>	Fees for cashier's checks and money transfers	\$
	Prepaid cards and phone cards	\$
	Bank or credit card fees	\$
	Other fees	\$
<b>OTHER</b>	School costs (like supplies, tuition, student loans)	\$
	Other payments (like credit cards and savings)	\$
	Other expenses this month	\$
<b>Total monthly expenses</b>		<b>\$ 0.00</b>
		Expenses

$$\begin{array}{ccccccc}
 \$ & 0.00 & - & \$ & 0.00 & = & \$ & 0.00 \\
 \text{Income} & & & \text{Expenses} & & & & 
 \end{array}$$

Maybe your income is more than your expenses. You have money left to save or spend.  
 Maybe your expenses are more than your income. Look at your budget to find expenses to cut.

**Print Form**