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Foreclosure Intake Form

I. CLIENT INFORMATION

Name of 1st Borrower: _____

Name of 2nd Borrower: _____

Address: _____

Home Phone: _____

Work Phone: _____

Best Times to Reach: _____

Marital Status: _____

Spouse (if any) _____

Children (names and ages) _____

Others in Household: _____

II. INFORMATION ABOUT HOME BEING FORECLOSED

Address of Property (if different from above): _____

Names of all Co-owners w/ Address (if different): _____

Year Purchased: _____

Original Purchase Price: _____

Estimate of Current Value: _____

Number of Rooms: _____

Owner Occupant? _____

At purchase? Yes _____ No _____

Now? Yes _____ No _____

Multi-Family Home? Yes _____ No _____

If so, provide the following information:

Name of tenants: _____

Rent received: _____

Condition: _____ Excellent _____ Good _____ Fair _____ Poor

Major repairs needed? Describe: _____

Number of Mortgages: _____

Other Liens _____

III. MORTGAGE

Type of Mortgage:

_____ Purchase Money

_____ Refinance

_____ Home Equity Loan

_____ Debt Consolidation

_____ Other

Year of Mortgage _____

Original Amount _____

Do you have original loan papers? Yes _____ No _____

Current Lender or Servicer: _____

Address of Current Lender or Servicer: _____

Phone: _____

Fax: _____

Contact Person: _____

Loan Account number: _____

Investor/Insurer

_____ FHA Insured

_____ VA

_____ RHS

_____ Fannie Mae

_____ Freddie Mac

_____ PMI _____

_____ Other _____

Term of mortgage (in months): _____

Interest Rate : _____

Principal and Interest Payment (monthly): _____

Tax and Insurance Payment (monthly): _____

Total Monthly Payment: _____

Months Behind: _____

Total Arrears Including Costs: _____

Current Principal Balance _____

Payoff Amount _____

Are you in Default? Yes _____ No _____

Status/Amount of Monthly Payment: _____

Reason for Default: _____

Give us a Statement of your Objectives and Plan: _____

Other Mortgages and Liens? Yes _____ No _____

Describe:

IMPORTANT NOTE: If you have other mortgages, please send us the information for each one using the questions on the form above.

Is this property in foreclosure? _____

If yes, when is the foreclosure sale? _____

Is this property your primary residence? _____

Do you plan to remain at this property? _____

Have you ever filed a bankruptcy, and if so, when? _____

How much money do you have at this time to put towards your delinquency? _____

What is your monthly combined NET income? _____

Assets Information

<u>LIQUID ASSETS</u>	<u>ESTIMATED VALUE</u>
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Cash on hand: _____

Checking and Savings: _____

Certificates of Deposit (COD's): _____

Stocks, Bonds, and Mutual Funds: _____

All Retirement Assets (401(k), IRA's, etc): _____

Other: _____

TOTAL LIQUID ASSETS: \$ _____

<u>NON-LIQUID ASSETS</u>	<u>EST. VALUE</u>	<u>BALANCE DUE</u>	<u>NET VALUE</u>
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Primary Home: _____ \$ _____

Other Home: _____ \$ _____

Automobile 1: _____ \$ _____

Automobile 2:	_____	_____	\$ _____
Automobile 3:	_____	_____	\$ _____
Cash Value of Life Insurance:	_____	_____	\$ _____
Boat:	_____	_____	\$ _____
Trailer:	_____	_____	\$ _____
Other: 2nd home loan:	_____	_____	\$ _____
TOTAL NON- LIQUID ASSETS	\$ _____	\$ _____	\$ _____

Income Information

<u>DESCRIPTION (MONTHLY):</u>	<u>BORROWER 1</u>	<u>BORROWER 2</u>	<u>Total</u>
Net Monthly Pay	_____	_____	_____
Bonuses:	_____	_____	_____
Child Support/Alimony:	_____	_____	_____
Rental Property:	_____	_____	_____
Disability/ Social Security/Retire:	_____	_____	_____
Room Rental:	_____	_____	_____
Pension:	_____	_____	_____
Public Benefits:	_____	_____	_____
Dividends:	_____	_____	_____
Trust Payments:	_____	_____	_____
Royalties:	_____	_____	_____
Other:	_____	_____	_____
Other:	_____	_____	_____

Expense Information

<u>DESCRIPTION:</u>	<u>MONTHLY PAYMENT:</u>
Payroll Deductions	
Income Tax Withheld.....	_____
Social Security.....	_____

FICA..... _____
Wage Garnishments..... _____
Credit Union..... _____
Other..... _____

Home Related Expenses

Mortgage or Rent..... _____
Second Mortgage..... _____
Third Mortgage..... _____
Real Estate Taxes..... _____
Insurance..... _____
Condo Fees & Assessments... _____
Home Maintenance/ Upkeep.. _____

Utilities

Gas..... _____
Electric..... _____
Oil..... _____
Water/Sewer..... _____
Telephone:..... _____
Land Line..... _____
Cell..... _____
Cable TV..... _____
Internet..... _____
Other..... _____

Food

Eating Out..... _____
Groceries..... _____

Clothing..... _____

Laundry and Cleaning..... _____

Medical

Current Needs..... _____
Prescriptions..... _____
Dental..... _____

Insurance Co-Payments
or Premiums..... _____

Other..... _____

Transportation

Auto Payments..... _____

Car Insurance..... _____

Gas and Maintenance..... _____

Public Transportation..... _____

Life Insurance..... _____

Alimony or Support Paid _____

School Expenses..... _____

Student Loan Payments _____

Entertainment..... _____

Newspapers/Magazines _____

Charity/Church..... _____

Pet Expenses..... _____

Amounts Owed on Debts

Credit Card..... _____

Credit Card..... _____

Credit Card..... _____

Credit Card..... _____

Medical Bill..... _____

Medical Bill..... _____

Other Back Bills (List).. _____

Cosigned Debts..... _____

Business Debts (List)... _____

Other Expenses (List).. _____

Miscellaneous..... _____

TOTAL..... _____

Other Important Debt Issues:

Wage Garnishments Yes _____ No _____
Pending Court Cases Yes _____ No _____
Pending Utility Shut-offs Yes _____ No _____
Car Loan Defaults or Repossessions Tax Debts Yes _____ No _____
Student Loan Debts Yes _____ No _____

Describe Assets and Other Resources:

Savings Yes _____ No _____ Amount \$ _____
Court Cases Pending Against Others Yes _____ No _____ Value \$ _____
Anticipated Tax Refunds Yes _____ No _____ Amount \$ _____
Assets Which Can Be Sold Yes _____ No _____ Value \$ _____
Pension or Retirement Funds Yes _____ No _____ Value \$ _____

I/We certify that the Financial Information contained herein, is a true and accurate statement of my/our current financial situation. I/We understand and acknowledge that any action taken by the lender of my mortgage (mortgagee) on my behalf will be made in strict reliance on the financial information I provided on this form. I hereby authorize the lender of my mortgage to obtain a copy of my credit report to verify the information contained herein.

Electronic Signature: Typing your name(s) below will have the same effect as your signature. You may fill out the form, print your name(s), date the form, and email it to us.

Print name: _____ Date: _____

Signature: _____ Date: _____

Print name: _____ Date: _____

Signature: _____ Date: _____