

Homeowner Intake Packet



Mortgage Assistance & Loss Mitigation Intake Packet

This packet is designed to help homeowners efficiently gather and submit the documentation commonly required by mortgage servicers when requesting mortgage assistance or loss mitigation options (such as loan modification, short sale, repayment plans, or other relief programs).

Providing complete, accurate, and up-to-date information improves the likelihood of timely review and reduces delays in your lender's decision-making process.

Tip #1: Provide all pages of bank statements, even if one page is blank.

Tip #2: Make sure any letters of explanation, expense worksheet and hardship letter are signed and dated.

Homeowner Information:

Borrower Name(s): _____

Property Address: _____

Mailing Address (if different): _____

Loan Number 1 (if available): _____

Loan Number 2 (if available): _____

Phone Number: _____

Email Address: _____

Required Documentation Checklist

Please provide all items listed below. Incomplete submissions may delay processing.

1. Bank Statements (Most Recent 2 Months)

- Two (2) most recent months of bank statements
- Include all pages, even blank or summary pages
- Statements must show:
 - Your name
 - Account number (partial numbers are acceptable)
 - Statement dates
 - All transactions

Tip: Screenshots or transaction histories are typically not accepted unless specifically approved by your lender.

2. Proof of Income (Most Recent 30 Days)

Provide one of the following, depending on your income type:

If Employed: - Paystubs for the most recent 30 days - Paystubs must show year-to-date income

If Self-Employed or Independent Contractor: - Most recent Profit & Loss (P&L) statement - Must reflect current monthly income and expenses

3. Federal Income Tax Returns (Most Recent 2 Years)

- Two (2) most recent years of signed federal tax returns
- Include all schedules and attachments

- Returns must be complete and legible

Tip: If returns were e-filed, include the signature pages or IRS acceptance confirmation if available.

4. Provide most recent mortgage statement(s), most recent condo/HOA statement

5. Hardship Letter (Signed and Dated)

- Signed and dated hardship letter
- Clearly explains:
 - The reason for financial hardship
 - When the hardship began
 - Whether the hardship is temporary or ongoing
 - Your intent to keep or sell the home, if applicable

A sample hardship letter is provided below.

Sample Hardship Letter

Use this sample as a guide. Customize it to reflect your specific situation.

[Your Name]

[Your Property Address]

[City, State, ZIP]

[Loan Number]

[Date]

To Whom It May Concern,

I am writing to explain the financial hardship that has caused me to fall behind on my mortgage payments and to request mortgage assistance or loss mitigation options.

Due to [briefly explain the hardship – for example: loss of income, reduction in work hours, medical issues, unexpected expenses, divorce, or other financial difficulty], my household income was significantly impacted beginning around [month/year]. As a result, I have been unable to maintain my regular mortgage payments while also covering necessary living expenses.

This hardship is [temporary / ongoing], and I am actively seeking assistance to [list workout option you are applying for].

I have enclosed the requested financial documentation to support my request for review. I respectfully ask that you consider me for any mortgage assistance or loss mitigation programs for which I may be eligible.

Thank you for your time and consideration.

Sincerely,

Borrower Signature

Printed Name

Date

Income/Expense Worksheet

Please complete this worksheet fully and accurately. List all sources of income and all household expenses, even if expenses are paid by another household member. Attach additional pages if needed.

Borrower Information:

- Borrower Name(s): _____
- Property Address: _____
- Phone Number: _____ Email: _____
- Number of Household Members: _____

SECTION A: MONTHLY HOUSEHOLD INCOME

List gross (before tax) monthly income for all household members.

Income Source	Borrower	Co-Borrower	Other Household Member(s)	Monthly Amount
Employment Wages / Salary				\$ _____
Overtime				\$ _____
Bonuses / Commissions				\$ _____

Self-Employment / Business Income				\$ _____
Social Security				\$ _____
Pension / Retirement				\$ _____
Disability / SSI				\$ _____
Unemployment				\$ _____
Child Support Received				\$ _____
Alimony / Spousal Support				\$ _____
Rental Income				\$ _____
Contributions from Others				\$ _____
Other Income (Specify): _____ _____				\$ _____

Total Monthly Household Income: \$ _____

SECTION B: MONTHLY HOUSING EXPENSES

Expense	Monthly Amount
Primary Mortgage Payment (PITI)	\$_____
Second Mortgage / HELOC	\$_____
Property Taxes (if paid separately)	\$_____
Homeowners Insurance (if paid separately)	\$_____
HOA / Condo Fees	\$_____
Mortgage Insurance	\$_____
Home Maintenance (Landscaping, Pool, etc.)	\$_____
Home Repairs	\$_____
Other Housing Expense: _____	\$_____

Total Housing Expenses: \$_____

SECTION C: UTILITIES & COMMUNICATIONS

Expense	Monthly Amount
Electricity	\$_____
Water / Sewer	\$_____
Gas	\$_____
Trash	\$_____
Telephone / Mobile Phones	\$_____
Internet	\$_____
Cable / Streaming Services	\$_____
Other Utility: _____	\$_____

Total Utilities & Communications: \$_____

SECTION D: TRANSPORTATION EXPENSES

Expense	Monthly Amount
Auto Loan / Lease Payment #1	\$_____

Auto Loan / Lease Payment #2	\$_____
Gas / Fuel	\$_____
Auto Insurance	\$_____
Maintenance / Repairs	\$_____
Parking / Tolls	\$_____
Public Transportation	\$_____
Other Transportation Expense: _____	\$_____

Total Transportation Expenses: \$_____

SECTION E: FOOD & HOUSEHOLD EXPENSES

Expense	Monthly Amount
Groceries	\$_____
Dining Out	\$_____
Household Supplies	\$_____
Personal Care / Hygiene	\$_____
Other Expense: _____	\$_____

Total Food & Household Expenses: \$_____

SECTION F: MEDICAL & INSURANCE EXPENSES

Expense	Monthly Amount
Health Insurance Premiums	\$_____
Medical / Dental Expenses	\$_____
Prescriptions	\$_____
Vision / Optical	\$_____
Life Insurance	\$_____
Other Medical Expense: _____	\$_____

Total Medical Expenses: \$_____

SECTION G: DEBT OBLIGATIONS

Expense	Monthly Amount
Credit Card Payments	\$_____
Personal Loans	\$_____
Student Loans	\$_____
IRS / Tax Payment Plans	\$_____
Child Support Paid	\$_____
Alimony Paid	\$_____
Other Debt: _____	\$_____

Total Debt Payments: \$_____

SECTION H: CHILDCARE, EDUCATION & DEPENDENT EXPENSES

Expense	Monthly Amount
Childcare / Daycare	\$_____
School Tuition / Fees	\$_____

Child Activities	\$_____
Elder Care / Dependent Care	\$_____
Other Dependent Expense: _____	\$_____

Total Childcare & Dependent Expenses: \$_____

SECTION I: OTHER & DISCRETIONARY EXPENSES

Expense	Monthly Amount
Clothing	\$_____
Entertainment	\$_____
Subscriptions / Memberships	\$_____
Religious / Charitable Donations	\$_____
Legal Expenses	\$_____
Other Expense: _____	\$_____
Other Expense: _____	\$_____

Total Other Expenses: \$_____

SECTION J: SUMMARY

- Total Monthly Household Income: \$_____
- Total Monthly Household Expenses: \$_____

Monthly Surplus / Deficit (Income minus Expenses): \$_____

Borrower Certification

I/We certify that the information provided above is true, complete, and accurate to the best of my/our knowledge.

Borrower Signature: _____ Date: _____

Co-Borrower Signature: _____ Date: _____

If you need more space, please attach additional pages clearly labeled.

3rd Party Authorization

To Whom It May Concern,

I/We, the undersigned borrower(s), hereby authorize the mortgage servicer listed below to release any and all information related to our mortgage loan to **The Home Guide Team**, including its representatives **Melissa Hoff** and **Alexis Bick**.

This authorization permits The Home Guide Team and the above-named individuals to request, receive, and discuss all information related to the loan, including but not limited to: loan balances, payment history, payoff statements, reinstatement amounts, loss mitigation status, foreclosure status, escrow information, and any other details necessary to evaluate available mortgage assistance or real estate options.

Borrower Name(s): _____

Property Address: _____

Loan Number: _____

Mortgage Servicer: _____

This authorization shall remain in effect until revoked in writing by the borrower(s).

Borrower Signature: _____ Date: _____

Borrower Signature: _____ Date: _____

Thank you for your cooperation.

Final Review Before Submission

- All checklist items completed
- All pages included
- Documents are legible
- Hardship letter signed and dated

If you have questions about loss mitigation programs available to you, contact your mortgage servicer or a HUD-approved housing counselor.

Contact us with any questions.

We are here to help you every step of the way.



2500 Weston Rd Suite 404, Weston, FL 33331

754.300.8539

support@thehomeguideteam.com

www.thehomeguideteam.com