



Authorization to Speak to HomeStart

DATE: _____

RE: _____ PHONE #: _____
Client Name

_____ PHONE #: _____
Co-Client Name

Street Address

City, State, Zip

LOAN ACCT #: _____

CLIENT SSN: _____ CO-CLIENT SSN: _____

I/We am/are currently receiving foreclosure counseling from HomeStart, whose employees will review my situation, advise me of my options, and help me to prepare a corrective action plan to bring my mortgage current.

I/We, (Client) _____ and (Co-Client) _____ give permission and authorization for (Mortgage Company) _____ to discuss my account with HomeStart and the following HomeStart employees:

Sarah Brinkmann
Mary Bradley

Lizzy Hobson

Racheal Falzone

Aida Yglecias

This authorization will last for the life of the loan or until I expressly, in writing, revoke said authorization. If you have any questions, please contact any of the above-named employees at:

HomeStart
803 N. Church Street
Rockford, IL 61103
27 W. Stephenson St.
Freeport, IL 61032
P: (815) 962-2011
F: (815) 962-2650

Client Signature

Co-Client Signature



Foreclosure Mitigation Counseling Disclosure Statement and Agreement

I understand that the purpose of the assistance, including counseling, workshops, online courses and/or Neighborhood Institute training programs, provided by HomeStart to me is to educate and counsel me regarding a home mortgage loan.

Initials

I understand that after I receive counseling from HomeStart I will receive a written action plan consisting of recommendations for handling my finances. I understand that, although HomeStart may make recommendations, I am not required to act on HomeStart’s recommendations, nor will HomeStart act on those recommendations without my permission.

Initials

I understand that, if I need services that HomeStart does not offer, HomeStart may provide me with a list of other agencies offering those services but that HomeStart will not make referrals to specific agencies. I understand that I am not obligated to use any of the services offered to me.

Initials

I understand that HomeStart provides information and education on numerous loan products and housing programs and I further understand that the housing counseling I receive from HomeStart in no way obligates me to choose any of these particular loan products or housing programs.

Initials

I understand that my counselor may answer questions and provide information regarding bankruptcy and/or foreclosure but that my counselor may not give legal advice. I understand that if I request legal advice, I will be referred to an attorney. I understand that, while an attorney may recommend that I file bankruptcy, filing is my choice based on my particular circumstances.

Initials

If I have a legal issue directly related to my foreclosure, delinquency, or short sale, I understand that my housing counselor may refer me for legal assistance with National Foreclosure Mitigation Counseling (“NFMC”) program funds. If I choose to accept that referral, I give permission for my housing counselor and attorney to share my file as permitted by state law and Illinois State Bar’s applicable Rules of Professional Conduct.

Initials

I understand that a lender that receives an application from me has my permission to give a copy of that application to HomeStart and to discuss that application with HomeStart. I understand that if I receive a loan from a lender and do not make any payment on time, HomeStart may contact me regarding the loan and offer counseling.

Initials

I understand that HomeStart receives congressional funds through the NFMC program and, as such, is required to share some of my personal information with NFMC program administrators or their agents for purposes of program monitoring, compliance and evaluation. I hereby give permission for NFMC program administrators and/or evaluators to follow-up with me for up to three (3) years from the date of this signed form for the purposes of program evaluation.

Initials

I acknowledge that I have received a copy of HomeStart’s Privacy Policy and Disclosure Statement. _____
Initials

I understand that HomeStart does not have the authority to approve or deny anything regarding a mortgage loan and it is not an agent for any lender. I understand that even if HomeStart believes that I may not qualify for a loan or workout plan, I have the right to submit an application to a lender. _____
Initials

I understand that completing HomeStart’s workshops, online courses and/or counseling does not guarantee that any application submitted by me to a lender will be approved by that lender. _____
Initials

I understand that completion of HomeStart’s workshops, online courses and/or counseling and my referral to a lender by HomeStart is not a commitment by the lender or by HomeStart to offer me a loan or workout plan. I understand that any commitment regarding a loan or workout plan must be in writing. _____
Initials

I understand that if I am dissatisfied with the services HomeStart provides, I may request a copy of HomeStart’s Complaint Resolution Process. _____
Initials

I understand that it is my right and responsibility to decide whether to engage in any course of counseling with HomeStart and to determine whether the counseling is suitable for me. I understand that I am free to choose any lender, lending/financing product, or home, from any entity regardless of the recommendations made by my counselor and still receive services from HomeStart. _____
Initials

I understand that HomeStart will close my case file after three (3) attempts to communicate with me via email, telephone, and/or U.S. postal mail. I also understand that I may request a copy of my file. _____
Initials

I understand that HomeStart reserves the right to withhold its services if I use inappropriate language, adopt an inappropriate attitude or engage in inappropriate behavior. _____
Initials

Client Signature

Co-Client Signature

Client Printed Name

Co-Client Printed Name

Date

Date



Authorization to Verify Employment, Income, Assets and Other Information

I acknowledge that I am working with HomeStart on issues related to a mortgage loan. I hereby authorize HomeStart to verify my past and present employment, earnings, bank accounts, stock holdings, other asset balances and other information as needed to assist me with my issues related to a mortgage loan. I further authorize HomeStart to order a credit report and verify other credit information, including past and present mortgage and landlord references.

I hereby authorize third parties to release information to HomeStart concerning employment histories, dates, title, income, hours worked, banking and saving accounts, mortgage loan information, rental verification (including opening dates, payment amounts, and payment records), other information HomeStart deems necessary to verify the above-mentioned information and a credit report.

I understand that all information obtained by HomeStart will be used to verify the information I have supplied to HomeStart and to help me with the issues related to the mortgage loan. I understand that the information obtained by HomeStart may be disclosed to lender agencies if such disclosure would assist me with my mortgage loan and I hereby authorize such disclosures. I acknowledge that, outside of the disclosures described above, the information obtained will be kept confidential.

I hereby authorize HomeStart to discuss my issues related to a mortgage loan with my lender. I also authorize my lender to provide HomeStart with a copy of any information the lender may have that will assist me with the issues related to my mortgage loan, including but not limited to: a copy of my mortgage application, a recent mortgage statement, and appraisal(s).

This authorization will be valid for one year from the date of signing, until I withdraw from HomeStart's counseling services or until HomeStart closes my case file, whichever comes first.

A photographic, facsimile or emailed copy of this signed authorization shall be as valid and as effective as the original signed authorization.

 Client Signature

 Co-Client Signature

 Printed Client Name

 Printed Co-Client Name

 Client Social Security Number

 Co-Client Social Security Number

 Date

 Date

Consumer Authorization and Release

I hereby authorize CoreLogic Credco, LLC ("CREDCO") to obtain my consumer report/credit information, credit risk scores and other enhancements to my consumer report (hereinafter collectively referred to as "Report") from one or more of the three national credit repositories (Equifax, Experiance, Trans Union) and provide a copy of the Report to my housing counseling agency, HomeStart (hereinafter referred to as "Counselor") for my Counselor to provide housing counseling services. This authorization is intended to comply with a consumer report request as set forth in 15 U.S.C. 1681b(a)(2).

I acknowledge that the Report is provided "AS IS" AND THAT CREDCO MAKES NO REPRESENTATION OR WARRANTY, EXPRESS OR IMPLIED, INCLUDING, BUT NOT LIMITED TO, IMPLIED WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE AND IMPLIED WARRANTIES ARISING FROM A COURSE OF DEALING OR A COURSE OF PERFORMANCE WITH RESPECT TO THE ACCURACY, VALIDITY, OR COMPLETENESS OF THE REPORT OR THAT IT WILL MEET MY NEEDS AND CREDCO EXPRESSLY DISCLAIMS ALL SUCH REPRESENTATIONS AND WARRANTIES.

I recognize that the accuracy, validity or completeness of the Report provided by CREDCO is not guaranteed by CREDCO and I hereby release CREDCO and CREDCO's parent, sister, affiliated companies, successors and assigns and its and their directors, officers, agents, employees and independent contractors (collectively, "CREDCO's Affiliates") from any liability for any negligence in connection with the preparation of the Report and from any loss, damages, expenses, costs or obligations of any kind and nature whatsoever suffered by me resulting directly or indirectly from the inaccuracy, invalidity or incompleteness of the Report.

I covenant not to sue or maintain any claim, cause of action, demand, cross action, counterclaim, third party action or other form of pleading against CREDCO or CREDCO's Affiliates for damages based upon the inaccuracy, invalidity or incompleteness of any Report provided by CREDCO hereunder. If one or more of the provisions, or a portion of a provision of this document are held for any reason to be invalid, illegal or unenforceable, such invalidity or illegality or unenforceability will not affect any other provisions of this document, and this document will be construed as if such invalid, illegal or unenforceable provision had not been contained therein.

Signature

Signature

Printed Name

Printed Name

Social Security Number

Social Security Number

Date

Date



Client Contract

HomeStart agrees to provide the following services:

- Analysis of your mortgage default, including the amount of the default and its cause.
- Presentation and explanation of the reasonable options related to your mortgage loan available to you.
- Assistance communicating with your mortgage lender and/or servicer.
- Timely completion of the actions HomeStart agrees to carry out.
- Explanation of foreclosure process.
- Confidential, honest, respectful and professional treatment.

I/We, _____, agree to abide by the following terms of service:

I/We will always provide honest and complete information to HomeStart, both verbally and in writing.

I/We will provide all of the documents and follow-up information that HomeStart requests by the deadlines that HomeStart sets.

I/We will be on time for appointments and understand that if I am/we are late for an appointment, the appointment will still end at the scheduled time.

I/We will call at least six hours before my/our scheduled appointment if I am/we are unable to attend the appointment.

I/We will contact HomeStart to report any changes in my/our situation immediately after the changes occur.

I/We understand that I/we must call to schedule an appointment if I/we need in-person assistance and I/we understand that HomeStart does not allow walk-ins.

I/We will treat all HomeStart employees with respect and I/we will not use inappropriate language or engage in inappropriate behavior.

I/We understand that failure to abide by the terms of service may cause HomeStart to close my/our file and to cease providing services to me/us.

Client Signature

Co-Client Signature

Client Printed Name

Co-Client Printed Name

Date

Date

Monthly Expense Sheet (What You Pay on a Monthly Basis)

Monthly Household Income		Total Medical	
Income One		Dentist	
Income Two		Doctor Visits	
Overtime		Medications	
Interest & Dividends		Utilities	
Other Income		Television	
Bonuses		Cell Phone	
Commission		Telephone	
Social Security Income		Water/Sewer/Electric/Gas	
Child Support		Total Food & Groceries	
AFDC		Alcoholic Beverages	
Alimony		Groceries	
Unemployment		Restaurants	
Other/SNAP		Miscellaneous	
Withholding		Auto Repairs	
Auto		Gasoline	
Auto Insurance		License/Tags/Taxes	
Auto Loan		Clothing	
Fixed Expenses (Paid Out of Pocket)		Laundry/Cleaning	
Child Support		Hobbies	
Alimony		Movies	
Credit Card Min. Payments		Newspapers/Magazines	
Housing Payment		Vacations	
1 st Mortgage		Charitable Donations	
2 nd Mortgage		Gifts	
Other Mortgage		Home Maintenance	
Home Owner Association		Pocket Money	
Home Equity Line		Pet Supplies	
Homeowners Insurance		Children's Allowances	
Property Tax		Childcare	
Rent		Hair Care	
Installment Loans		Toiletries	
Student Loans		Misc.	
Other Loans		Misc.	
Insurance (Paid Out of Pocket)		Public Transportation	
Life Insurance		Savings	
Health Insurance		Monthly Savings Plan	
Other Insurance		Other Savings	
		Totals	
		Gross Income	
		Net Income	
		Total Expenses	

Please describe what caused you to call our office:

Client Signature

Co-Client Signature

Client Printed Name

Co-Client Printed Name

Date

Date



Privacy Policy and Disclosure Statement

Privacy Policy

HomeStart is committed to protecting your privacy. We realize that the concerns you bring to us are highly personal in nature and assure you that all of the information you share with HomeStart will be managed in accordance with all legal and ethical guidelines. We may use your anonymous aggregated case file information to evaluate the effectiveness of our services, to gather valuable research information and to design future programs. However, your "non-public personal information" (e.g. total debt, income, living expenses, etc.) will be provided to creditors, program monitors and others only if you sign the Foreclosure Mitigation Counseling Disclosure Statement and Agreement.

Information that we gather about you includes: (1) information provided by you, such as your name, address, social security number, and income; (2) information provided by your creditors and others, such as your loan balance; and (3) information from a credit-reporting agency, such as your credit report.

You may refuse to allow HomeStart to disclose your non-public personal information to third parties and HomeStart will still assist you to the best of its ability. However, if you refuse, HomeStart will not be able to answer any questions from third parties. If you wish to change your disclosure status, please call us at 815-962-2011.

So long as you have not refused disclosure, we may disclose some or all of the information that we collect to your creditors or third parties when we determine that the disclosure would be helpful to you, would aid us with your counseling, or is required by the grants that make it possible for HomeStart to provide services to you.

We may compile and aggregate data that you give to us with the information of other clients, but we may not disclose this information in a manner that would personally identify you. We may also disclose any nonpublic personal information about you to anyone if required to do so by law. Finally, we restrict access to your nonpublic personal information to employees who need to know that information to provide services to you. We maintain physical, electronic and procedural safeguards that comply with federal privacy regulations.

Disclosure Statement

HomeStart, in addition to counseling, provides the following services: homebuyer education, post purchase education, credit counseling, and financial education.

HomeStart has financial relationships with several industry partners, including, but not limited to Alpine Bank, Associated Bank, Blackhawk Bank, Citizens State Bank of Lena, Fifth Third Bank, Members Alliance Credit Union, Midwest Community Bank, Northwest Bank, PNC Bank, Illinois Bank and Trust, Rockford Area Association of Realtors, Stillman Bank, and Union Savings Bank. HomeStart also has financial relationships with CITI Bank, JP Morgan Chase, Fifth Third Bank, and US Bank, who provide funding to HomeStart.

As a client, you are not obligated to accept any of the services offered by HomeStart or its industry partners.

HomeStart hereby certifies that the staff and volunteers who provide foreclosure intervention counseling have no conflict(s) of interest due to any other relationships with servicers, real estate agencies, mortgage lenders and/or other entities or industry partners, whether identified above or not, that may stand to benefit from particular counseling outcomes.

A handwritten signature in black ink, appearing to read "Sarah Brinkmann", written in a cursive style.

Sarah Brinkmann
Executive Director of HomeStart