



NEW CLIENT INFORMATION SHEET

BORROWER

NAME ADDRESS SS # PHONE (H) (W) DOB BEST TIME TO BE REACHED (WHICH PHONE NUMBER)

CO-BORROWER

NAME ADDRESS SS# PHONE (H) (W) DOB

EMPLOYMENT INFORMATION

MONTHLY INCOME OTHER INC. EMPLOYER ADDRESS POSITION YRS W/ CO

MONTHLY INCOME OTHER INC. EMPLOYER ADDRESS POSITION YRS W/ CO

PROPERTY INFORMATION

MORTGAGE PROPERTY ADDRESS: PERSONAL RESIDENCE OR INCOME PROPERTY: CURRENT: YES / NO DO YOU WANT TO KEEP THE HOUSE: YES / NO VALUE OF HOME ORIGINAL PURCHASE PRICE MONTHLY PAYMENT YEARLY TAXES/INSURANCE If no, how many months behind DO YOU OWN OTHER PROPERTIES: YES / NO # OF OTHER PROPERTIES YR BUILT MTG BALANCE TERM OR YEARS TAXES & INSURANCE ESCROWED: Y / N

Occupancy Status:  Owner  Tenant  Vacant

Condition:  Poor  Fair  Good  Excellent

Listed for Sale? No  Yes  If yes, please provide the following information:

Name of Realtor: \_\_\_\_\_ Real Estate Company: \_\_\_\_\_

Realtor Business Phone # ( ) - Asking Price: \$ \_\_\_\_\_ Months listed? \_\_\_\_\_

**FIRST MORTGAGE AMT:**\$ \_\_\_\_\_ **FIXED OR VARIABLE:** \_\_\_\_\_

**INTEREST RATE:** \_\_\_\_\_ **RESET DATE:** \_\_\_\_\_ % \_\_\_\_\_

**LENDER:** \_\_\_\_\_ **LOAN NUMBER:** \_\_\_\_\_

**MORTGAGE PAYMENT:** \_\_\_\_\_

**SECOND MORTGAGE AMT:**\$ \_\_\_\_\_ **FIXED OR VARIABLE:** \_\_\_\_\_

**INTEREST RATE:** \_\_\_\_\_ **RESET DATE:** \_\_\_\_\_ % \_\_\_\_\_

**LENDER:** \_\_\_\_\_ **LOAN NUMBER:** \_\_\_\_\_

**MORTGAGE PAYMENT:** \_\_\_\_\_

### EMPLOYMENT

#### Borrower:

Currently Employed  Self-employed  Unemployed / Not Working   
Full Time  Part Time  Retired

Name and address of current employer (or business if self-employed):  
\_\_\_\_\_

Number of years with current employer? \_\_\_\_\_ Type of business? \_\_\_\_\_

#### Co-Borrower

Currently Employed  Self-employed  Unemployed / Not Working   
Full Time  Part Time  Retired

Name and address of current employer (or business if self-employed):  
\_\_\_\_\_

ASSETS			
Description	Amount / Value	Amount Owed	Net Value
Checking Account	\$	\$	\$
Savings Account	\$	\$	\$
401k/IRA/Keogh	\$	\$	\$
Primary Residence	\$	\$	\$
Other Property	\$	\$	\$
<b>Total</b>	\$	\$	\$

**MONTHLY INCOME**

	<b>Borrower</b>	<b>Co-Borrower</b>	<b>Total</b>
Gross Income (base salary)	\$	\$	
Monthly Net Income (after deductions)	\$	\$	
Social Security	\$	\$	
Disability (short term or long term)	\$	\$	
Unemployment	\$	\$	
Rental Income	\$	\$	
Income from any other source	\$	\$	
<b>TOTAL INCOME</b>	\$	\$	

**RENTAL / LEASING INFORMATION**

<b>Property 1 Address</b>				
VALUE OF PROPERTY	MONTHLY RENTAL INCOME	MONTHLY MTG PAYMENT	TAXES INCLUDED IN PAYMENT? YES / NO	INSURANCE INCLUDED IN PAYMENT? YES / NO
\$	\$	\$	\$	\$
		\$	\$	\$

<b>Property 2 Address</b>				
VALUE OF PROPERTY	MONTHLY RENTAL INCOME	MONTHLY MTG PAYMENT	TAXES INCLUDED IN PAYMENT? YES / NO	INSURANCE INCLUDED IN PAYMENT? YES / NO
\$	\$	\$	\$	\$
		\$	\$	\$

<b>Property 3 Address</b>				
VALUE OF PROPERTY	MONTHLY RENTAL INCOME	MONTHLY MTG PAYMENT	TAXES INCLUDED IN PAYMENT? YES / NO	INSURANCE INCLUDED IN PAYMENT? YES / NO
\$	\$	\$	\$	\$
		\$	\$	\$

<b>Property 4 Address</b>				
VALUE OF PROPERTY	MONTHLY RENTAL INCOME	MONTHLY MTG PAYMENT	TAXES INCLUDED IN PAYMENT? YES / NO	INSURANCE INCLUDED IN PAYMENT? YES / NO
\$	\$	\$	\$	\$
		\$	\$	\$

<b>Property 5 Address</b>				
VALUE OF PROPERTY	MONTHLY RENTAL INCOME	MONTHLY MTG PAYMENT	TAXES INCLUDED IN PAYMENT? YES / NO	INSURANCE INCLUDED IN PAYMENT? YES / NO
\$	\$	\$	\$	\$
		\$	\$	\$

<b>Property 6 Address</b>				
VALUE OF PROPERTY	MONTHLY RENTAL INCOME	MONTHLY MTG PAYMENT	TAXES INCLUDED IN PAYMENT? YES / NO	INSURANCE INCLUDED IN PAYMENT? YES / NO
\$	\$	\$	\$	\$
		\$	\$	\$

## MONTHLY EXPENSES WORKSHEET

Description of Expense	Monthly Payment	Balance Due
Primary Mortgage 1 <sup>st</sup>	\$	\$
Primary Mortgage 2 <sup>nd</sup>	\$	\$
Primary Mortgage 3 <sup>rd</sup>	\$	\$
Rent Payment (if not occupying property)	\$	\$
Property Taxes (if not impounded)	\$	\$
Home Owners Insurance	\$	\$
Homeowners Associations Fees	\$	\$
Other Property Loan Mortgage Loan 1	\$	\$
Other Property Loan Mortgage Loan 2	\$	\$
Other Property Loan Mortgage Loan 3	\$	\$
Other Property Loan Mortgage Loan 4	\$	\$
Other Property Loan Mortgage Loan 5	\$	\$
Auto Loan 1	\$	\$
Auto Loan 2	\$	\$
Auto Insurance	\$	\$
Auto Maintenance	\$	\$
Gasoline	\$	\$
Credit Cards (total of minimum payments)	\$	\$
Utilities / Water / Gas / Electric / Cable	\$	\$
Health / Life Insurance	\$	\$
Medical / Dental	\$	\$
Telephone / Internet/Cell Phone	\$	\$
Child Support	\$	\$
Child / Dependant Care	\$	\$
Groceries / Food	\$	\$
School Tuition / Loans	\$	\$
Car Expenses (Parking)	\$	\$
Clothing / Dry Clothing	\$	\$
Other Loans	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
<b>Total Expenses</b>	\$	\$

**I certify that all the information presented herein as well as attachments, is an accurate statement to my / our monthly expenses.**

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_



## Authorization Form

We/I hereby request that \_\_\_\_\_, with “The Certified Group of Companies Inc” (TCG) attempt to negotiate and discuss a loan modification/short sale/settlement with our lender, granting them full authority to change, rearrange or adjust the terms and the outstanding obligations with our lender under any loan documents.

We/I also agree that TCG may disclose information pertaining to the amount, nature and other relevant particulars of or debts, liabilities and obligations, together with information as to our financial status, income and other data in attempting to achieve a solution for which we have applied for these services.

We / I agree further to hold TCG, its employees, officers and agents harmless from any claims, suits action or demand of our creditors, ourselves or any other person arising out of our application herewith presented.

Lender	Loan #
Lender	Loan #
Property Address:	
City:	State:                      ZIP:
Borrower’s Name as appears on mtg statement:	
Social Security#:	
Co-Borrowers Name as it appears on mtg statement	
Social Security#:	

\_\_\_\_\_  
Borrowers Signature

\_\_\_\_\_  
Co-Borrowers Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

**THE CERTIFIED GROUP OF COMPANIES INC**

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