

# Affordable Housing Alliance

3535 Route 66  
Parkway 100 Complex  
Building 4  
Neptune, NJ 07753  
Phone: 732-389-2958  
Fax: 732-922-4100



Affordable Housing Alliance

“We Help With Housing

Donna M. Blaze  
Chief Executive Officer

## Home Equity Conversion Mortgage Client Counseling Session Packet

### **IMPORTANT CLIENT NOTICE**

All clients must complete all pages in this packet. Please return the completed packet to this agency either in person or by mail. **Our mailing address is now Affordable Housing Alliance 3535 Rt. 66, Parkway 100 Complex, Building #4 Neptune, NJ 07753.** Should you have any further questions or concerns, please call (732) 389-2958 and ask to speak with Linda Osborn.

**Please note that there is a \$200 fee for counseling regardless if you close on the loan or not. We prefer the \$200 be paid at or prior to the counseling session (money order or credit card only please). Alternatively, you can pay a \$100 deposit at time of the counseling session and \$100 at closing. If you earn less than 200% of the federal poverty level, we will only charge you \$125 at the time of closing but proof of income is required. All money paid is nonrefundable.**



CHARTERED MEMBER

**HECM APPLICATION  
HOMEOWNER INFORMATION WORKSHEET**

Homeowner (A) \_\_\_\_\_

Homeowner (B) \_\_\_\_\_

Homeowner Street Address \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone (A) \_\_\_\_\_ Home Phone (B) \_\_\_\_\_

Work Phone (A) \_\_\_\_\_ Work Phone (B) \_\_\_\_\_

Cell Phone (A) \_\_\_\_\_ Cell Phone (B) \_\_\_\_\_

Email Address (A) \_\_\_\_\_

Marital Status: \_\_\_\_\_

Homeowner (A) Race: \_\_\_\_\_ Homeowner (B) Race: \_\_\_\_\_

Homeowner (A) SSN \_\_\_\_\_ Homeowner (B) SSN \_\_\_\_\_

Homeowner (A) DOB \_\_\_\_\_ Homeowner (B) DOB \_\_\_\_\_

Household Annual Income: \_\_\_\_\_ Household Size: \_\_\_\_\_

Square Footage: \_\_\_\_\_

Homeowner (A) Education (Check one)

- College
- High School/GED
- None
- Primary
- Vocational

Homeowner (B) Education (Check one)

- College
- High School/GED
- None
- Primary
- Vocational

Person(s) on Deed: \_\_\_\_\_

## PROPERTY INFORMATION

Home's Purchase Price: \_\_\_\_\_ Estimated Value of Home: \_\_\_\_\_

1<sup>st</sup> Mortgage Balance: \_\_\_\_\_ Monthly Mortgage Payment: \_\_\_\_\_

Other Mortgages:  Yes  No 2<sup>nd</sup> Mortgage Balance: \_\_\_\_\_

Years in Current Home: \_\_\_\_\_

Main reason(s) for investigating a reverse mortgage: \_\_\_\_\_

Type of Property:  Single Family detached  2-4 Unit  Mobile Home  
 Townhouse  Condominium  Other: \_\_\_\_\_

## HOUSEHOLD INCOME

Household Monthly Income	Gross	Net	Verification
Homeowner (A) Monthly Income Employer (1)	\$	\$	
Homeowner (A) Monthly Income Employer (2)	\$	\$	
Homeowner (B) Monthly Income Employer (1)	\$	\$	
Homeowner (B) Monthly Income Employer (2)	\$	\$	
Social Security /SSI / SSDI	\$	\$	
Unemployment Compensation	\$	\$	
Veterans Benefits	\$	\$	
Retirement Benefits/Pension	\$	\$	
Monies From Rental properties	\$	\$	
Household Members Over Age 18 Wages	\$	\$	
Food Stamps	\$	\$	
Other	\$	\$	
Other	\$	\$	
<b>TOTAL HOUSEHOLD INCOME</b>	<b>\$</b>	<b>\$</b>	

## HOUSEHOLD ASSETS

Checking Account Balance: \_\_\_\_\_

Savings Account Balance: \_\_\_\_\_

Other (stocks, annuities, IRA): \_\_\_\_\_

Other (stocks, annuities, IRA): \_\_\_\_\_

### Monthly Expenses

These categories are just suggestions – only fill in information applicable to your situation

#### Housing

Mortgage(s)	
Gas	
Water/Sewer	
Electricity	
Telephone: Land Line	
Telephone: Cell	
Cable:	
Internet:	
HOA Fee:	
Homeowners Insurance ( <i>if not in mortgage payment</i> )	
Taxes ( <i>if not in mortgage payment</i> )	

Credit Cards (please provide  
minimum monthly payment &  
balance for each car):

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#### Transportation

Gas	
Car Payment	
Car Insurance	

#### Insurance

Life	
Disability	
Health	

#### Medical

Prescriptions	
Co-pay	

#### Miscellaneous

Food	
Clothing	
Pets	
Other	
Other	

Comments:

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