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Dear Homeowner,

Read thoroughly and initial, signaling you have read and understand what Willamette Neighborhood Housing Services (WNHS) is expecting from you.

1. ____ I understand that I will FULLY PARTICIPATE in the Loan Modification reprocess with my Lender and actively communicating with the Lender's Loss Mitigation Department.
2. ____ I understand that IF I do not provide ALL requested documents in a timely manner; within 5 business days, the file will NOT be sent to the Lender as they do not accept incomplete packets.
3. ____ I will NOT receive a follow-up call after my counseling session; unless I call with a question, I have hit a roadblock with my lender and/or I have attained a loan modification. If WNHS should hear anything from your lender before hand WNHS will give you a call. I understand that when and if I leave a message, I will get a call back within 2 business days. Other concerns will be addressed according to urgency and receipt of message.
4. ____ I understand that my point of contact will be my foreclosure prevention counselor at WNHS.
5. ____ I acknowledge that I have received a copy of the WNHS Privacy Policy.
6. ____ I understand that WNHS receives congressional funds through the National Foreclosure Mitigation Counseling (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.
7. ____ I understand that the NFMC program administrators and/or their agents may follow-up with me between now and June 30, 2011 for the purposes of program evaluation.
8. ____ I understand that WNHS provides foreclosure mitigation counseling after which I will receive a written action plan consisting of recommendations for handling my finances, possibly including referrals to other assistance agencies or other WNHS programs/services as appropriate.
9. ____ I understand that a counselor may answer questions and provide information, but not give legal advice. If I want legal advice, I will be referred for appropriate assistance.
10. ____ I understand that WNHS provides information and education on numerous loan products and housing programs and I further understand that the housing counseling I receive from WNHS in no way obligates me to choose any of these particular products or housing programs.
11. ____ I understand that I may be referred to other services provided by the organization, another agency or agencies as appropriate that may be able to assist with my particular concerns that have been identified. I also understand that I am not obligate to use any of the services offered to me.
12. ____ I understand WNHS reserves the right to update or change our service delivery model, and will do our best to keep you apprised of these changes.
13. ____ I understand WNHS provides the following additional services: Education (financial fitness & homebuyer education classes), Counseling (pre-purchase & post-purchase counseling), Lending (first-time home buyer programs, rehab loans), Affordable Housing in Linn and Benton Counties and MicroBusiness (training, technical assistance, access to capital).

Client Signature

Date

