

Workout Plan Worksheet

Homeowner Information

Referral Source _____ Loan # _____
Date _____ Housing Counselor _____
Borrower _____
Borrower SSN _____ Borrower DOB _____
Address _____
City _____ State _____ Zip Code _____
Phone (home) _____ (cell) _____ (work) _____
Email Address _____
Borrower Employer _____
Borrower Job Title _____ How Long? _____
Co-Borrower _____
Co-Borrower SSN _____ Co-Borrower DOB _____
Address _____
City _____ State _____ Zip Code _____
Phone (home) _____ (cell) _____ (work) _____
Email Address _____
Co-Borrower Employer _____
Co-Borrower Job Title _____ How Long? _____

Number of Occupants in Household 18 & over _____ Number of Children under 18 _____

Property Address _____
Property Purchase Date _____