

United States Representative Jerry McNerney

MORTGAGE ASSISTANCE AUTHORIZATION FORM

I understand that the provisions of Public Law 93-579 (Privacy Act of 1974) prohibit the disclosure of information of a personal nature from the files of an individual without his or her consent.

Accordingly, I authorize Congressman Jerry McNerney and his staff to access and review any and all of my records that relate to the issue stated below.

Signature	Date					
To begin processing your case, please complete all of the following information:						
Circle One: Mr. Mrs. Miss Ms.	Date of Birth					
First Name	Last Name					
Address	City					
State Zip	E-mail					
Daytime Phone						
Property Information						
Date of Purchase:/ Type Address:	e of property (house, condominium, etc.):					

City:		\$	State: Z	Zip:	Co	ounty:	
Bedrooms	Bathrooms	Square Footage	Stories/Floors	Garage	Basement	Lot Size/Acres	Year Built

1	Estimated	current value	of property
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- 2. Total annual property taxes:
- 3. Current condition of property:______
- 4. Is this property occupied by owner or is it rented by tenant?:_____
- 5. Is desired outcome to keep or sell the property:
- 6. If selling, is the property currently listed with a Realtor?:_____
- 7. If yes, how long has the property been for sale?:_____

Mortgage Information

	1 st Mortgage	2 nd Mortgage
Lender's Name		
Loan Identification Number		
Balance		
Type of loan (Fixed, Adjustable, Interest-Only, etc.)		
Interest Rate (if adjustable, state the rate change and date of change)		
Total Monthly Payment		
Payments Current? If no, date of last payment?		

*Which of the following categories does your loan fall under (please circle one)? FHA VA Conventional Other

Please answer the following questions:

Do you believe that you are at risk of foreclosure?: Y / N If yes, Why?:
Has a foreclosure date been set?: If yes, what is the date?://
How much cash do you have to put toward stopping the foreclosure?:
Have you experienced any recent changes in your finances (unemployment, medical expenses)?: Y / N
If yes, please explain:
Do you have assets (jewelry, car, life insurance policy, etc.) that you can sell to help reinstate your loan?: Y / N
If yes, please list:
Are you or a family member able to take on further employment to help with your payments?: Y / N
How much can you pay monthly, in addition to your current payment, toward your mortgage?:
How long can you afford to pay this monthly amount?:
Are your property taxes and insurance included in your current monthly payment?:
Have you filed for bankruptcy?:
Have you met with a HUD-approved housing counseling agency for assistance? Y / N
If yes, which agency?
Are you represented by legal counsel? Y / N
Have you contacted other elected officials for assistance with this matter? Y / N
If yes, which elected officials?

Briefly explain the problem you are having or the information desired*:

ttach additional pages if necessary a stance. Do not send original docume			t to the issue v	vith which you	seel

For urgent assistance, please call (209) 476-8552 or fax us at (209) 476-8587. Otherwise, please mail your completed form to our Stockton office at:

> Attention: Constituent Services Office of Congressman Jerry McNerney 2222 Grand Canal Boulevard, #7 Stockton, CA 95207