

CDPE Homeowner Financial Worksheet

CERTIFIED DISTRESSED PROPERTY EXPERT®

Borrower Name		Co	-Borrower Name	9		
1st Loan Number		2 nd	Loan Number			
INCOME—TAKE HOME PAY:						
	Borrower		CO-Borrower		TOTAL	
Primary Job						
Misc. Income Overtime					†	
Part-time Job (net)					1	
Retirement-Military						
Retirement-Civil Service	1					
Support / Alimony	1					
Social Security	1					
Room & Board / Rent					İ	
TOTAL NET INCOME						
How often is Borrower paid? How often is Co-Borrower paid?	☐ Every Week ? ☐ Every Week		ry 2 Weeks ry 2 Weeks	□ Twice A N □ Twice A N		Once A Mont
EXPENSES:						
	MONTHLY PAYMENT		BALANCE		NAME OF CR	EDITOR
Home Mortgage						
2 nd Home Mortgage						
Auto Loan						
Auto Loan						
Creditor						
Creditor						
Creditor						
Creditor						
Creditor						
Creditor						
Creditor						
Student Loan						
Alimony / Support						
Child Care						
IRS						
Chapter 13						
Electricity						
Heating Fuel					Oil or Natural	Gas
Water & Sewer						
Telephone						
Cable TV						
Auto Insurance						
Health Insurance						not by employer)
Life Insurance					Paid directly (not by employer)
Medical/Dental Expences						



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Print Co-Borrower's Name	: Co-Borrower's Name Date Co-Borrower's Signature	
Print Borrower's Name	Date	Borrower's Signature
Mortgage Insurers immediately of or if it is determined that the finantification of the more than (1) I shall be liable for all of the mortgage insurers or AGENT of insurers and/or AGENT shall have me based, in whole or in part, on	f any material change in the cial information provided he tigage insurers makes decisosts (fees) incurred or damand BROKERAGE above, and the right, in its sole discretion the inaccurate or incomple	nentioned above, my lender, Veterans Affairs, FHA/HUD, the investor, or the efinancial information that I/We have provided herein. If I/we fail to do so, erein has been misrepresented by me, and lender, servicer, Veterans Affairs, sions which would not have been made had the true facts been known, ages suffered by lender, servicer, Veterans Affairs, FHA/HUD, the investor, d (2) lender, servicer, Veterans Affairs, FHA/HUD, the investor, the mortgage on, to terminate any arrangement or agreement that has been extended to the information that I/we have provided.
including without limit	ation, any current or previou	
2. Order a title search fro	om any title agency; and/or	
1. Order a credit report f	rom any credit reporting ag	ency;
I/We hereby authorize my/our len	der, servicer, Veterans Affair	s, FHA/HUD, the investor or the Mortgage Insurers to:
Attachments, is true, accurate ar	nd correct to the best of my r, Veterans Affairs, FHA/ HUI	osed Financial Status Report and certify that all information, as well as all /our knowledge. I/we understand that submission of this information in no D, the investor, the mortgage insurers, (Agent) or (BROKERAGE) to provide
Cash on Hand:	Other	Misc. Assets:
Balance in IRA:		Valuables to be sold:
Balance in 401K:		Value of Stocks:
A. Total Monthly Income: \$ B. Total Monthly Expenses: \$		
TOTAL MONTHLY EXPENSES		
Other Expenses		
Charitable Donations		
Recreation / Spending Money		
Homeowner's Association Dues		
Internet Service		
Cell Phone		
Dry Cleaning/Laundry		
Clothing		
Transportation, Parking, Tolls		
Groceries School Lunches		
Personal Property Tax		
Real Estate Tax		Only list here if not in Mortgage
Homeowner's Insurance		Only list here if not in Mortgage
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