

DEBT MANAGEMENT CREDIT COUNSELING CORP.

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FINANCIAL INFORMATION FORM

FOR HOUSING COUNSELING, PLEASE COMPLETE ALL INFORMATION ON THIS FORM AND EMAIL OR FAX TO DMCC

Applicant's Name: _____	Phone(s): _____
Co-applicant's Name: _____	Best time to call: _____
Address: _____	Email: _____
Date of Birth: _____	Primary Reason For Seeking Assistance (circle one) Budgeting Reduced Income Medical Death in Family Other: Housing Counseling (circle one) Pre-Purchase Post Purchase Foreclosure Reverse Other: Other Special Circumstances (please write below)
Marital Status: _____	
# of Children/Dependants: _____	

MONTHLY INCOME	
Gross Salary	
Net Salary (take home)	
Alimony Received	
Child Support (Rcvd)	
AFDC Payments	
Food Stamps	
Disability (SS Sup)	
Retirement Pay	
Social Security	
Investments	
Other Income source	

TRANSPORTATION	
Value of Vehicle(s)	
Total Loan Bal(s)	
Total Loan Pymt(s)	
Total Lease Pymt(s)	
Auto Insurance	
Fuel	
Repairs and Maint	
Tolls/Bridges/Parking	
Other	
Walks / Bikes	YES NO

WORK EXPENSES	
Work Lunch	
Work Travel	
School Fees/Books	
Education	
Student Loan Payment	
Other	

HOUSING - OWN	
Property Value	
Mortgage Balance(s)	
Interest Rate	
Mortgage Pymt(s)	
Property Tax & Ins	
HELOC/2nd Mrtg Bal	
HELOC/2nd Mrtg Pymt	
Assoc/Lot fees	
Improve/Repairs	
Other	

MEDICAL EXPENSES	
Medical Insurance	
Medical Bills	
Medications	
Dental Bills	
Life Insurance	
Other Insurance(s)	

RECREATION	
Entertainment	
Dining	
Cigarettes	
Alcohol	
Gambling	
Other Entertainment	
Health Club	

HOUSING - RENT	
Rent	
Renters Insurance	
Assoc/Lot Fees	
Improve/Repairs	
Other	
Lives w/Parents	YES NO

CHILDREN/FAMILY	
# Dependants	
Child Support Paid	
Day Care	
Other Child Exps	
# Pets	
Pet Expense	
# Dependant Parents	
Elder Care	
Other	

SAVINGS	
Savings Deposits	
401K Contributions	
Charitable Donations	
Other	

HOUSING - UTILITIES	
Electric	
Gas	
Oil	
TV	
Internet	
Phone(s)	

LIVING EXPENSES	
Soda/Coffess	
Groceries	
Dry Cleaning	
Clothing	
Grooming	
Cosmetics	
Dining	
Other	

OBLIGATIONS	
Credit Cards:	
Monthly Payments (total)	
Balances (total)	
Other Secured Debt:	
Monthly Payments (total)	
Balances (total)	
Other Debt:	
Monthly Payments (total)	
Balances (total)	

ASSETS	
Cash (Bank Balances)	
Investments	
Certificate of Deposit	
Personal Property	
Other	