Home Equity Conversion Mortgage Counseling Session Evaluation

U.S. Department of Housing and Urban Development Office of Housing Federal Housing Commissioner OMB Approval No. 2502-0585 (Exp.8/31/2019)

Counseling Agency Name and Address (completed by HUD office)

A "Reverse Mortgage" pays a homeowner loan proceeds drawn from accumulated home equity and that requires no repayment until a future time. A HUD approved reverse mortgage is called a Home Equity Conversion Mortgage (HECM). The following questions below relate to your HECM counseling experience.

1.	. How did you hear about the HECM program? 7. Where did the counseling take place?					
••	□AARP website, handout	☐ Lender		☐ In your home	☐ Counselor's office	
	or referral			☐ In private setting	☐ On the telephone	
	\square HUD Staff or HUD website	☐ Television/radio ad		☐ Other:	·	
	□Newspaper or other publication	☐ Family member	8. Was the setting in which the counseling was conducted			
	☐Senior fair or local program	☐ Estate planning firm	private so that no one could hear your conversation to insure confidentiality?			
	□Other:			,		
				☐ Yes	□ No	
2.	 How did you hear about the counseling agency you utilized? ☐ HUD Staff or HUD website ☐ Lender referral 		۵	How many times did ye	ou meet with your counselor?	
			Э.		s, not counting initial intake call) and for	
	☐ Local community action prog	rogram 🗆 AARP		☐ 15 to 30 minutes	☐ 30 minutes to 1 hour	
	\square State and/or local office on a	aging Estate planning firm		☐1 hour or more	☐ Other:	
	☐Random selection provided by ☐ Automated online Lender referral system		10	. a. Did the agency char	ge you a fee for the counseling?	
	□Other:			☐ Yes	□ No	
3.	Who interviewed you when you first contacted the counseling agency?		b. If "Yes," how much was the charge for the counseling service? \$			
	☐ A receptionist	☐ A counselor			xplain the basis for the charges?	
4.	. Were you provided with a basic information package directly related to your specific situation in advance of your counseling session?			☐ Yes	□ No	
			d. If "Yes," did you find the fees reasonable?			
	☐ Yes	□ No		☐ Yes	□ No	
5.	If you answered "Yes" to question 4, did the information package contain information on the various HECM options available, the payment options and the amortization sheets?		11	11. Did the counselor disclose to you, at any time, any relationship it may have with a specific lender or bank?		
				☐ Yes	□ No	
	☐ Yes	□ No	12	Did the counselor provide you with information about other		
6.	6. Was the counselor knowledgeable of the HECM program?			reverse mortgage programs or alternatives to reverse mortgages?		
	☐ Yes	□ No		☐ Yes	□ No	

Credit counseling	13.	Which alternatives to a HEC that apply)	M were discussed? (check all	17. Did the counselor discuss the pros and cons and potential pitfalls of purchasing an annuity with your HECM proceeds?		
Selling/moving Property tax/deferral Home repair loan/grant Family support Yes No No		☐ Credit counseling	☐ Medicaid	□Yes	□ No	
Selling/moving Property tax/deferral Home repair loan/grant Family support Yes No Health/Social Services Reverse mortgage program Other: Go to the same counselor/counseling agency Go to another agency (briefly describe why) 14. Did the counselor make any specific recommendations regarding which lender to utilize? Go to another agency (briefly describe why) 15. Did the counselor make any specific recommendations about what mortgage product you should obtain? Yes No No No No Applied for a HECM/reverse mortgage Decided not to apply Undecided Applied for an alternative program (specify which)		☐ Home equity/refinance	☐ Prescription drug program	18 Did the counselor m	nake a specific recommendation as to	
Health/Social Services		☐ Selling/moving	☐ Property tax/deferral			
□ Other: □ Go to the same counselor/counseling agency 14. Did the counselor make any specific recommendations regarding which lender to utilize? □ Go to another agency (briefly describe why) 15. Did the counselor make any specific recommendations about what mortgage product you should obtain? □ Yes □ No 16. Did the counselor advise you of the potential impact a HECM loan may have on the following? □ Applied for a HECM/reverse mortgage □ Inheritance of property □ Medicare □ Undecided □ Property tax and insurance □ Medicaid □ Applied for an alternative program (specify which)		☐ Home repair loan/grant	□Family support	☐ Yes	□ No	
Go to another agency (briefly describe why) Go to another agency (briefly describe why)		☐ Health/Social Services	☐ Reverse mortgage program	19. If further counseling	were necessary, would you:	
14. Did the counselor make any specific recommendations regarding which lender to utilize? Yes No Did the counselor discuss your current financial situation and complete a budget or financial analysis with you? Yes No 15. Did the counselor make any specific recommendations about what mortgage product you should obtain? Yes No 21. As of today, have you: Applied for a HECM/reverse mortgage Decided not to apply Inheritance of property Medicare Property tax and insurance Medicaid Other retirement programs Social security		☐ Other:		\square Go to the same counselor/counseling agency		
and complete a budget or financial analysis with you? Yes	14.			☐ Go to another ago	ency (briefly describe why)	
about what mortgage product you should obtain? Yes		☐ Yes	□ No			
Applied for a HECM/reverse mortgage Applied for a HECM/reverse mortgage Decided not to apply Decided not to apply Undecided Undecided Applied for an alternative program (specify which) Other retirement programs Social security Social security Applied for a HECM/reverse mortgage Decided not to apply Undecided Undecided Applied for an alternative program (specify which) Applied for an alternative program (specify which) Other retirement programs Social security Other retirement programs Other retirement	15.			☐ Yes	□ No	
16. Did the counselor advise you of the potential impact a HECM loan may have on the following?		☐ Yes	□ No	21. As of today, have y	ou:	
□ Inheritance of property □ Medicare □ Undecided □ Property tax and insurance □ Medicaid □ Applied for an alternative program (specify which) □ Other retirement programs □ Social security	16.			☐ Applied for a HECM/reverse mortgage		
□ Property tax and insurance □ Medicaid □ Applied for an alternative program (specify which) □ Other retirement programs □ Social security □ Applied for an alternative program (specify which)				☐ Decided not to apply		
Other retirement programs Social security ———————————————————————————————————		☐ Inheritance of property	☐ Medicare	☐ Undecided		
		☐ Property tax and insuran	nce	☐ Applied for an alternative program (specify which)		
Please use the remaining space to provide any other comments you may have regarding your counseling experience.		☐ Other retirement programs ☐ Social security				
	Ple	ase use the remaining space t	o provide any other comments you	may have regarding your o	counseling experience.	

Public reporting burden for this collection of information is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not conduct or sponsor, and a person is not required to respond to, a collection information unless that collection displays a valid OMB control number. This information is collected in connection with HUD's Housing Counseling Program, and will be used by HUD to determine that the grant applicant meets the requirements of the Notice of Funding Availability (NOFA) and to assign points for awarding grant funds on a competitive and equitable basis. The information is required to obtain funding under Section 106 of the Housing and Community Development Act of 1974. The information is not considered sensitive and no assurance of confidentiality is provided.