

FORECLOSURE PREVENTION PROGRAM

Reporting Instruments & Instructions

TWO REQUIRED REPORTING FORMS FOR THE 2010-2011 GRANTS

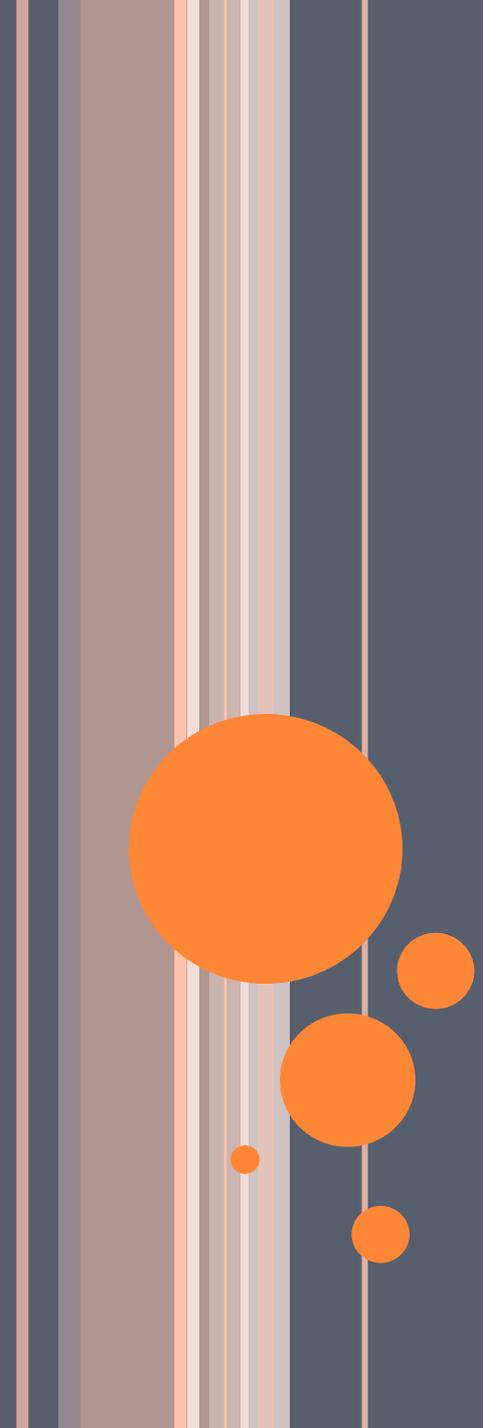
BOTH WILL BE REVIEWED IN THIS SLIDESHOW

- Client Data Collection
- Job Creation Tracking

Client Data Collection Report should be e-mailed to cfurnari@nyshcr.org

Job Creation Tracking Report should be e-mailed to rsinclair@nyshcr.org





CLIENT DATA COLLECTION

THIS REPORT SHOULD BE E-MAILED
TO CFURNARI@NYSHCR.ORG

CLIENT DATA COLLECTION REPORTING SCHEDULE

<u>Quarter</u>	<u>Due</u>
○ 4: July 1 – Sept. 30, 2010	10/15/10
○ 5: Oct. 1 – Dec. 31, 2010	1/15/11
○ 6: Jan. 1 – March 31, 2011	4/15/11
○ 7: April 1 – June 30, 2011	7/15/11
○ 8: July 1 – Sep. 30, 2011	10/15/11
○ 9: Oct. 1 – Dec. 15, 2011	12/28/11



COLUMN A: APPLICANT ID NUMBER

- Type In - Mandatory Column
- The Applicant ID Number should follow the client as they go through the process (Remember, this report is a snapshot of who you assisted in the quarter you are reporting. Clients should be removed and added to the report depending on whether their file was worked on in that quarter)



COLUMN B: DATE OF INITIAL CONTACT

- Drop Down Menu

Q1 (Oct.-Dec.'08) to

Q10 (Jan.-March'11)

AARA Q3 (April-June'10)

AARA Q4 (July-Sep.'10)

AARA Q5 (Oct.-Dec.'10)

AARA Q6 (Jan.-March'11)

AARA Q7 (April-June'11)

AARA Q8 (July-Sep.'11)

AARA Q9 (Oct.-Dec.'11)

- Mandatory Column

- Choose from Drop Down Menu

- First 10 choices are initial date of contact for 2008 – 2010 Grant (for clients you are continuing to assist)

- For additional guidance, please see separate instructions on next page



COLUMN B: DATE OF INITIAL CONTACT CONTINUED

- Regardless of the reporting period, the date of initial contact should be used to report service
- If you need to report both grants in one quarter, submit two separate reports (i.e. your 2008-2010 grant ends 10/20/10 so you would submit one report for those clients assisted from 10/1/10 – 10/20/10 and choose the date of initial contact as Q9 (Oct.-Dec.'10), and then if your new grant began 10/21/10 you would submit a report for those clients you assisted between 10/21/10 and 12/31/10 and choose the date of initial contact as AARA Q5 (Oct.-Dec.'10)).



COLUMN C: ZIP CODE

- Type In - Mandatory Column



COLUMN D: CENSUS TRACK

- Type In - Mandatory Column
- Census Track code should be 11 digits



COLUMN E: RACE/ETHNICITY

- Drop Down Menu

White

Black/African American

Hispanic

American Indian

Asian

Multiple Race

Other

Choose not to Respond

- Mandatory Column

- Choose from Drop Down Menu



COLUMN F: INCOME LEVEL

- Drop Down Menu
- *Less than 50% of Area Median Income (AMI)*
- *Between 50% and 79% of AMI*
- *Between 80% and 100% of AMI*
- *Greater than 100% of AMI*
- Mandatory Column
- Choose from Drop Down Menu



COLUMN G: SPECIAL POPULATIONS

- Drop Down Menu
- *Persons with Disabilities*
- *Persons who are Veterans*
- *Persons who are elderly (65+)*
- *Single-Parent Household*
- *More than One*
- Only Choose from the drop down menu if one of the criteria on the left is met



COLUMN H: RESIDENCE TYPE

- Drop Down Menu

Single Family

Duplex

3-Family

4-Family Plus

Condo

Co-op

Tenant Only

Not Reported / Other

- Mandatory Column

- Choose from Drop Down Menu

- Please note new option for “Tenant Only” for tenants living in home being affected by Subprime Foreclosure



COLUMN I: PRODUCT CAUSING DEFAULT/FORECLOSURE

- Drop Down Menu
 - Subprime Home Loan*
 - Fixed Rate Mortgage*
 - Interest Only Loan*
 - Option Adjustable Rate Mortgage*
 - Home Equity Line of Credit*
 - Adjustable Rate Mortgage*
 - Hybrid Adjustable Rate Mortgage*
 - 80/20 Subprime Home Loan*
 - Tenant - Landlord is in Foreclosure*
 - Unknown*
 - Other*
- Mandatory Column
- Choose from Drop Down Menu
- If Subprime Home Loan is one of the causes, choose that first
- Please note new option for “Tenant Only” for tenants living in home being affected by Subprime Foreclosure



COLUMN J: PRIMARY REASON FOR DEFAULT

- Drop Down Menu

Subprime/Unconventional Loan Product

Reduction in Income

Poor Budget Management Skills

Loss of Income

Medical Issues

Increase in Expenses

Divorce or Separation

Death of Family Member

Failed Business Venture

Increase in Loan Payment

Payment Dispute

Tenant – Landlord in Foreclosure

Owe Property or School Taxes

Other

- Mandatory Column

- Choose from Drop Down Menu

- Although there may be multiple reasons, choose best one

- Please note new option for “Tenant Only” for tenants living in home being affected by Subprime Foreclosure



COLUMN K: STATUS OF LOAN AT INITIAL CONTACT)

- Drop Down Menu

30-60 Days Late

61-90 Days Late

91-120 Days Late

More than 120 Days Late

*Tenant – Landlord in
Foreclosure*

Current

- Mandatory Column

- Choose from Drop Down Menu

- Please note new option for “Tenant Only” for tenants living in home being affected by Subprime Foreclosure



COLUMN L: NAME OF ORIGINATING LENDER

- Mandatory Column for Homeowners Counseled – Type In
- The column can be left vacant for Tenants counseled, if unknown.



COLUMN M: NAME OF CURRENT LOAN SERVICER

- Mandatory Column for Homeowners Counseled – Type In
- The column can be left vacant for Tenants counseled, if unknown.



COLUMN N: TYPE OF SERVICES PROVIDED THIS QUARTER ONLY

- Drop Down Menu
 - Consultation **
 - Loss Mitigation / Negotiation*
 - Counseling*
 - Referral for Legal Representation*
 - Legal Advice (including assistance with pro se forms)*
 - Defense of Foreclosure Action*
 - Affirmative Litigation*
 - Bankruptcy Representation*
 - Court-based Services*
 - Representation at Settlement Conference*
 - Tenant – Counseling*
 - Other*
- Mandatory Column
- Choose from Drop Down Menu
- Although multiple services may have been provided to a client during this reporting period, choose the most recent.
- Please note new option for “Tenant Only” for tenants living in home being affected by Subprime Foreclosure

*Consultation includes intake, call back and preliminary assessment

COLUMN O: RESULT OF ASSISTANCE

- Drop Down Menu

Obtained Loan Modification

Brought Mortgage Current

Refinanced Mortgage

Sold House in Satisfaction of Mortgage or Short Sale

Sold house but still Owes Lender

Deed in Lieu

Foreclosed

Referred for Legal Assistance

Referred to Housing Counselor

Filed Bankruptcy Under Chapter 7

Filed Bankruptcy Under Chapter 13

Foreclosure Action Dismissed/Discontinued

Withdrew from Counseling

Cannot Assist Client (please choose reason in column O)

Tenant - Informed of Rights

Tenant – Assisted with Relocating

*Ongoing - No Results as of Date of this Report **

Other

- Mandatory Column

- Choose from Drop Down Menu

- Although there may be multiple results, choose the best one.

- Please note new option for “Tenant Only” for tenants living in home being affected by Subprime Foreclosure

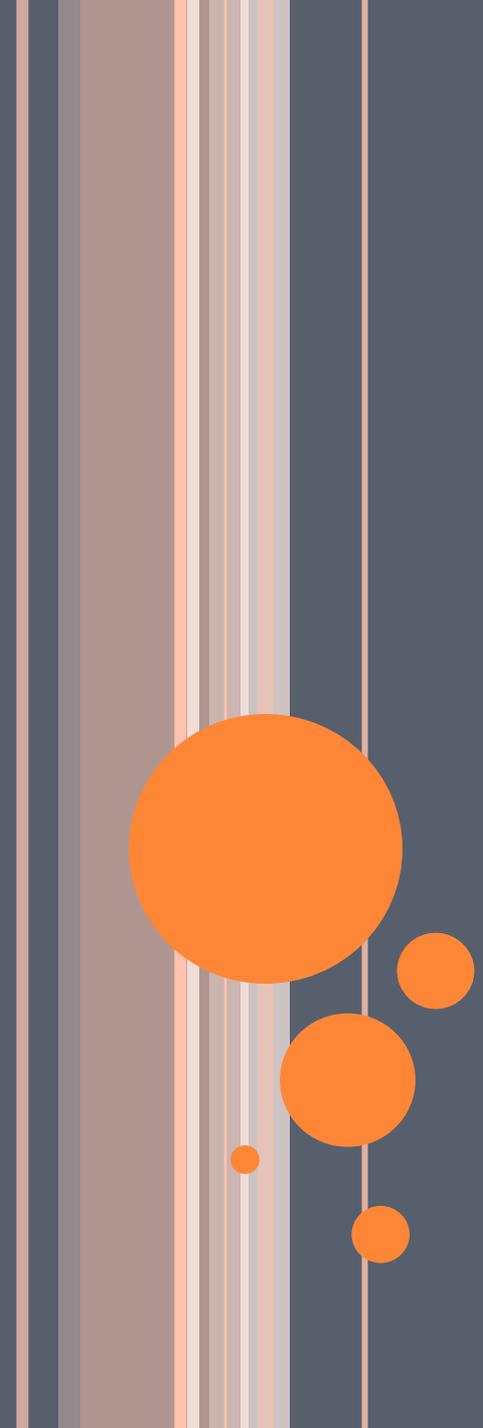
*Ongoing includes House for Sale, Modification in 3 month trial period, and Forbearance



COLUMN P: IF ASSISTANCE COULD NOT BE PROVIDED, WHY NOT?

- Drop Down Menu
- *Rescue Funds not Available*
- *Economics of Refinance not Viable*
- *Client did not Meet Program Requirements*
- *Client did not Complete and/or Submit Required Forms*
- *Bank Declined Client Refinance or Modification*
- *Client Owed Property or School Taxes*
- *Exceeded Eligible Applicant's Capacity to Service Additional Clients*
- *Other*
- Mandatory Column
- Choose from Drop Down Menu
- Although there may be multiple reasons, choose the best one.





JOB CREATION TRACKING

**THIS REPORT SHOULD BE E-MAILED
TO RSINCLAIR@NYSHCR.ORG**

PURPOSE OF JOB CREATION REPORTING

- The Division of Housing and Community Renewal (DHCR) is a sub-recipient of ARRA funds from the NYS Education Department.
- The Federal Government is tasked with keeping track of the jobs created or kept as a result of this program and the funds received.
- The following slides will assist you in understanding the intent of this reporting as well as the guidelines to report correctly.



JOB CREATION REPORTING SCHEDULE

<u>Quarter</u>	<u>Due</u>
○ Q 1-2011: Dec.15– March 15, 2011	3/15/11
○ Q 2-2011: March 15– June 15, 2011	6/15/11
○ Q 3-2011: June 15 – Sep. 15, 2011	9/15/11
○ Q 4-2011: Sep. 15– Dec. 15, 2011	12/15/11



JOB CREATION FTE FORMULA

- The Full Time Equivalent (FTE) formula is intended to prevent over-counting of short-term or part-time jobs. For example, if a job is funded by the Recovery Act, but the individual's employment only lasts for one week, then a full job will not be reported. In this case, the FTE formula will discount the job total to reflect the temporary nature of the job.



FILLING OUT THE TOP SECTION OF FORM

- **Project Name:** Subprime Foreclosure Prevention Program
- **Reporting Organization:** Your company's name (if completing for a sub recipient, put their name in parenthesis – see slide 27)
- **Reporting Quarter:** Chosen from slide 22



FILLING OUT THE TOP SECTION OF FORM (CONTINUED)

- **What are the standard hours in a full-time work week schedule for your organization:** insert the total number of weekly hours and multiply x 13.

For Example

40 hours a week x 13 = 520

If you have sub-recipients you are reporting for, you may have to calculate the formula above for several different agencies, depending on if their standard hours coincide with yours.

You will need to use this calculation later in the worksheet.



GRANTEES WITH MULTIPLE PARTNERS

- If you are the primary agency (grantee) for an award with multiple partner organizations you should **submit an ARRA work sheet for each partner.**
- When you e-mail your report(s) to DHCR **include in the e-mail a list of all the partners you are reporting for- and a total of all FTEs reported for all program partners, including yourself.**



COLUMN 1: ARRA FUNDED EMPLOYEE

- Insert Name of Employee (only include employees paid with DHCR funds)



COLUMN 2: DESCRIPTION OF POSITION

- Make an “X” in the “existing” or “new” column
- Type in the percent of the salary paid with the grant in numbers (i.e. 50%, 60%, 100%)



COLUMN 3: NUMBER OF HOURS OF WORKED IN THE QUARTER

- In order to calculate this total, multiply the weekly number of hours worked x 13 weeks.

For example:

Employee works 20 hours a week

20 x 13 = 260 (this employee worked 260 hours in this quarter)

Insert “260” into column 3

If the employee only worked 4 weeks in one quarter then you would multiply the weekly hours worked x 4 to get the correct amount.

For example:

Employee works 20 hours a week

20 x 4 = 80 (this employee worked 80 hours in this quarter)

Insert “80” into column 3



COLUMN 4: FTE PER POSITION

- In order to calculate the FTE for this Quarter, you are going to use numbers that you have already calculated.

Take the “Number of Hours Worked in the Quarter” (column 3 of Form, slide 29) and divide it by the number of Quarterly Hours in that employees Full-Time Schedule (refer to slide 26)

For Example:

260 # of Hours Worked

520 # of Hours in Full Time Schedule = .5

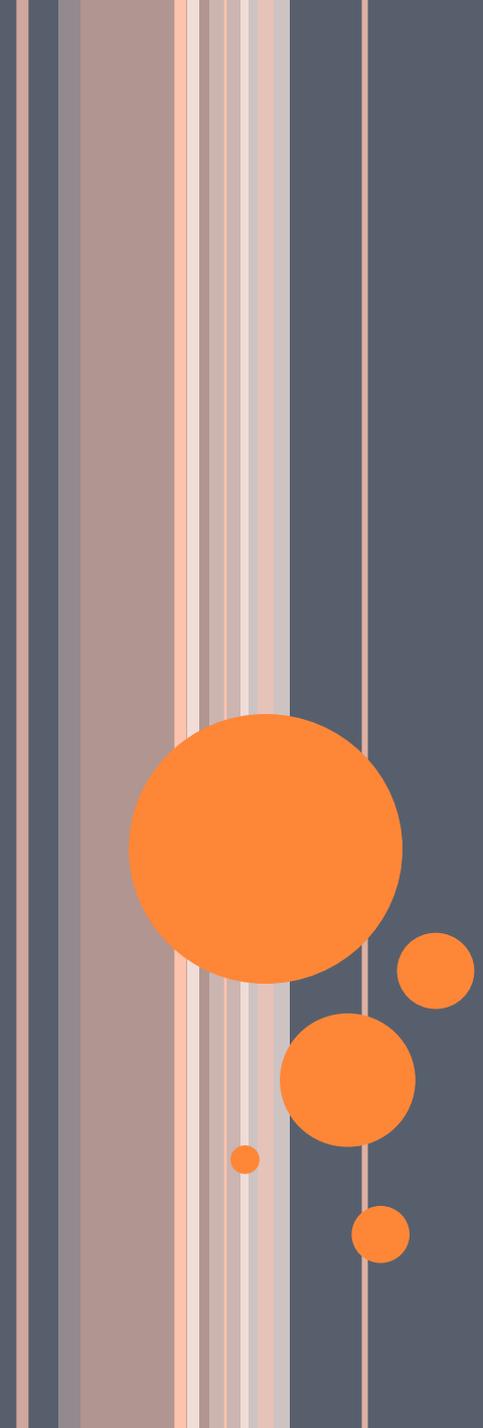
.5 is the number you would put in the last column



IN CONCLUSION

- Once you insert the number in the last column of the form, the Total FTEs at the bottom should automatically calculate.





**IF YOU HAVE ANY QUESTIONS,
PLEASE FEEL FREE TO CALL OR
E-MAIL ME.**

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