



National Foreclosure Mitigation Counseling Program Action Plan

Organization Name _____

Plan Start Date _____

Homeowners(s) Name _____

Counselor Name _____

Reason(s) for actual, or potential, mortgage delinquency: _____

Homeowner's Assessment of property condition: Excellent Good Fair Poor

Est. Property Value \$ _____

Given the analysis of the homeowner's financial and overall situation, define the goal and/or possible solutions:

Homeowner Action	Comments (documents needed, referral contact info, etc)	Due Date	Date Completed

Counselor Action	Comments	Due Date	Date Completed

Additional Notes