



Client Initial Qualification

Borrower Name(s): _____

Home Address: _____

Home Phone: _____ Contact Phone (Cell): _____

Loan Type: Purchase Refinance

Lender Name: 1st TD _____ Loan Program Fixed ARM

FHA 2/28 3/27 5 yrs Fixed 7 yrs Fixed 10 yrs Fixed

Other Program(s): _____

Balance: \$ _____ Int. _____ (%) P&I: \$ _____ (1)

Lender: 2nd TD: _____ Loan Type(s): HELOC Stand Alone

Balance: \$ _____ Int. _____ (%) Payment \$ _____ (2)

Income prior year and the year applying for home loan:

Prior Year: 20__ \$ _____ per year. Divided By 12: _____ (3)

Year of transaction: 20__ \$ _____ per year. Divided by 12: _____

Monthly Expenses during the loan application(all expenses): \$ _____ / Month (4)

Qualifying: **(a)** add (1) + (2): Total \$ _____ plus (4): \$ _____ = \$ _____ (5)

Take (5) divided by (3): _____ %(*). If more than 45%, then it's potential a case.

(b) Any loans that are: 1yr fixed, 2/28, 3/27, 5/25, 7/23 and pick-a-payment (non-amortized).

(c) All Stated Income loan programs (NINJA,NINA,SISA,etc...).

Acknowledged and Agreed to the initial consultation to ALS Services program.

Signature of Borrower

Date

Signature of Co-Borrower

Date



Dear Homeowner, _____

Please submit the attached papers along with request documentation to ALS Services. It is our goal to review your submission within a timely manner. If multiple properties are owned, please submit the schedule of Real Estate form and submit a separate application for each property you would like evaluated. After review, you will be notified if ALS Services sees a potential claim and would like to take on your file. In the event that ALS Services and the client choose to move forward with the process, the client will need to provide appropriate documents to proceed.

Please submit the required documentations that are listed on page 13 to ALS Services.

Fax: (714) 442 - 1276

Email: ALSBackEnd@yahoo.com

Mail: ALS Services

13701 Beach Blvd, Suite B

Westminster, CA 92683

For updates of your status, please contact or email your Account Representative below.

ALS Services looks forward to reviewing your information.

Account Representative

Telephone #

Email Address

Account Manager

Division Manager

OFFCIE USE ONLY:	
Date Submit	____ / ____ / ____
Checked in:	_____
_____ LA	_____ PD



We Help U Fight Back!!!

Borrower's Name

Co-Borrower's Name

Borrower's Social Security #

Co-Borrower's Social Security #

Borrower's Work #

Co-Borrower's Work #

Residence Phone #

Primary Contact Cell Phone #

Name of Employer (Borrower)

Years

Months

Name of Employer (Co-Borrower)

Years

Months

Email Address

Fax number

MONTHLY INCOME DATA

Job Title:	_____	_____
	Borrower	Co-Borrower
Income at time of loan:	\$ _____	\$ _____
	Borrower	Co-Borrower
Current monthly Gross Income:	\$ _____	\$ _____
	Borrower	Co-Borrower

I/We can manage a monthly mortgage payment of \$ _____ without a hardship. Any higher monthly payment \$ _____ per month, I/We will either be forced to sell or lose my/our home.

X _____
Borrower Signature

X _____
Co-Borrower Signature



Please ask our representative to help complete form if you are unsure.

Current Residence Address (Not Subject Property)

City, State, and Zip Code

Subject Property Address

Subject Property City, State, and Zip Code

Property Taxes: \$ _____ Insurance: \$ _____

HOA (Homeowner Association): \$ _____ Rental Income: \$ _____

CURRENT LOAN DETAIL 1ST TD, (Please provide all information)

Mortgage Company Name

\$ _____
Current Balance

Customer Service Phone Number

Account Number

\$ _____
Monthly Mortgage Payment

Purchase Refinance

Date Closed: ____/____/____

Loan Type: _____

Notice of Default _____

Notice of Sale _____

Notice to Quit _____

Unlawful Detainer _____ (*)



CURRENT LOAN DETAILS 2nd TD

Mortgage Company Name

\$ _____
Current Balance

Customer Service Phone Number

Account Number

\$ _____
Monthly Mortgage Payment

Purchase Refinance

Please give a brief storyline description of your situation:



PAYMENT ACKNOWLEDGEMENT FORM

I/We understand that all subsequent monthly payments are due and must be received on or before the 1st or 15th of every month after you've entered into the agreement. Your next payment of \$_____ is due on ___/___/___ (mm/dd/yyyy) and the same day of each month thereafter until three payments have been made to the ALS Services. It is further understood that if any payment is late, ALS Services, reserves the right to immediately discontinue all services and close your file. All payments received up to that point will be considered earned.

Please check form of payment: Cashier's Check Money Order

Billing Address: _____

City, State and Zip Code: _____

PLEASE SEND PAYMENTS IN FORM OF MONEY ORDERS OR CASHIER'S CHECKS, MAKE PAYABLE AND MAIL TO:

ALS Services
13701 Beach Blvd., Suite B.
Westminster, CA. 92683

I/We acknowledge the receipt and understanding of these payment(s) instructions and agree to all its terms and conditions along with those in the consumer agreement.

X _____
Borrower Signature

X _____
Co-Borrower Signature



AUTHORIZATION TO RELEASE CONSUMER INFORMATION

I/We, _____ hereby authorize to release to ALS Services, all of my/our consumer information including but not limited to the complete files related to the following:

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____

Date this _____ day, of _____ (month), 2009.

Signature of Client

Print Client Name

Signature of Client

Print Client Name



AGREEMENT

This Agreement is made effective this _____ day of _____ 2009, by and between _____ (hereafter "Client") ALS Services (hereafter "Company").

This Agreement is made with regard to the following facts:

Client desires Company to analyze existing loans which are secured by the Client's primary residential property more commonly known as _____ ("Property"). The current loans are with _____

Company desires to assist Client in analyzing his existing loans.

The objectives of this Agreement are to determine whether the Client's current loans are accurate and subject to revision or rescission. Only loans that are in the areas of California, Nevada, Arizona, and Florida will be examined at this time.

Client understands that the objectives of this Agreement does not in any manner change Client's obligation to pay any and all outstanding mortgage payments related to the Property. Client understands that s/he is solely responsible and obligated to make payments on any outstanding mortgages related to the Property.

Client understands that Company provides a unique and valuable service.

Client understands that Company is not engaged in loan modification services and does not negotiate with lenders. Client further understands that Company is not a foreclosure consultant.

NOW THEREFORE, in consideration of the foregoing facts and the following mutual agreements and undertakings, the Parties agree as follows:

SCOPE OF SERVICES PROVIDED BY ALS Services:

- Interview clients of events from origination to present
- Analyze every Client loan to determine if there is fraud committed and/or violations were made on State and/or Federal laws.
- Review chain of title (with assignments, substitutions, deed, note, NOD, NOS, deed upon sale).
- Review all origination docs (initial HUD1/GFE, final HUD1, Loan apps, UW transmittal, Closing Documents, all disclosures, deed, note...).
- Refer to attorney for further necessary actions or procedures



CLIENT OBLIGATIONS

Client shall be responsible for the following:

- Pay all fees as set forth in this Agreement.
- Cooperate with Company.
- Sign an Authorization to Release Consumer Information.

FEES FOR SERVICE BY COMPANY

Client will pay to Company the following fees for services:

A.1. Monthly Fees. Monthly payment of \$_____ on each _____ of the month, starting on _____ 2009, for a maximum of three payments. After the third payment and only if Client's matter requires legal referral, Client will pay between \$1,000-\$2,500 or it can varies depends on case by case basis, as a one time fee for filing and court costs. All attorneys working with the ALS Services will work with client to arrange a suitable fee arrangement throughout the process of litigation ***and will make attempts to collect any and all fees paid by client from Lender.*** Client understands and agrees that any payment to the Company under this Agreement does not in any manner change Client's obligation to pay any and all outstanding mortgage payments related to the Property. Client understands and agrees and upon full and complete notice and disclosure and full advisement that s/he is solely responsible and obligated to make payments on any outstanding mortgages related to the Property.

A.2. Twenty Percent (20%) of monies refunded or credited by the lender. For example if a lender pays borrower \$10,000 based upon demand and loan analysis by Company, then Company would be entitled to \$2,000 of the \$10,000. Also, for example, if the lender gives a principal reduction of \$100,000 based on the Company's demand and loan analysis, Company would be entitled to a fee of \$20,000.

A.3. Twenty Percent (20%) of any loan rescinded or loan amount forgiven. For example, if a loan of \$400,000 is settled as cash, Company is entitled to \$80,000 additional compensation because Client received a \$400,000 benefit.

A.4. Company will always first seek reimbursement and fees from lender and/or current beneficiary of the loans. Usually, if the matter is litigated, Company will be able to seek fees from the lender/beneficiary. Client may be responsible for Company fees in the situation where Client does not want to go through litigation with the lender/beneficiary.

NO GUARANTEES

Company makes no guarantee as to outcome of any demand with the lender or assignee or any possible litigation.



DISCLAIMER

- ALS Services is not a law firm.
- ALS Services is not a foreclosure consultant
- ALS Services is not a credit repair or credit counselor.
- ALS Services is not a loan modification company or service.
- ALS Services is not a Real Estate Company nor acts in capacity of Real Estate Agent.

EFFECT ON CLIENT'S CREDIT

Client is fully advised and on notice and fully disclosed as to this potential situation and upon advice and consent directs the Company to take actions to make demands, rescind, litigate as necessary to meet the objectives of this Agreement.

REFUND/CANCELLATION

- Refund Policy of Company. It is the policy of the Company that if in the opinion of the Company, it cannot find a problem with any Client loan that would potentially result in a benefit to the Client, the Company will refund monies paid to the Company by the Client,(except \$250 of processing fee).
- Company will inform Client if it believes it can help the Client as provided in this paragraph.
- Client has the right to cancel this Agreement within Three (3) business days of the date of signing this Agreement.

TERMINATION OF AGREEMENT

Company's obligation to Client is terminated upon any of the following:

- Client fails to make payment as set forth in the Agreement.
- Client file for Bankruptcy
- Death or incapacity of the Client
- The Parties agree to terminate the agreement
- Client in any manner fails to cooperate with Company

Company shall have the right to cease any existing negotiations, If the contract is terminated for any reason under this Section; the Client is not entitled to any refund.



REPRESENTATIONS INCONSISTENT WITH AGREEMENT

Client understands and is fully aware upon full notice, disclosure and advisement that no one has the authority to make any representations inconsistent with the terms and conditions of this Agreement.

CONFIDENTIALITY

The Parties agree that they will not provide, nor allow to be provided, any information to the public, news media, or any other individual regarding their involvement in this Agreement or the involvement of other Party in the Agreement or the identity of any Party hereto without express permission and written consent of all Parties.

REMEDIES

Dispute Resolution:

Mediation: Client and ALS Services agree to mediate any dispute or claim arising between them out of this Agreement, or any resulting transaction, before resorting to arbitration or court action.

I/We have read the above mediation provisions and agree to the terms and conditions.

Dated: _____

ACKNOWLEDGEMENT THEREOF, by signing below, I confirm that as a CLIENT I read and have full understanding of all terms and conditions set forth by the AGREEMENT.

Client Signature

DATE

Client Signature

DATE

Please to the best of your ability, share with ALS Services some of the details surrounding your loan.



Did the loan take longer than expected to close? _____

Did loan program or terms change? _____

Were you turned down before being approved by the lender? _____

Was your loan a stated income or stated asset qualifying loan? _____

Were you amazed that you were able to qualify? _____

Were "band-aid loan" terms used, or promises of refinance? _____

Did you get cash out of a loan that you then used toward making the payments? _____

Did you understand what kind of loan you were getting? _____

If English is your second language, was there someone who translated for you? _____

Are there things you didn't (or still don't) understand regarding the loan or the application process?

Did you hand write a loan application? _____

Where did you sign your loan docs, (at a title company or home)? _____

Were you asked to provide letter of explanation? _____

Did anyone have to sign on or off of the loan and/or title for you to receive loan?

At time of loan, did you have any of the following liabilities?

Student Loans \$ _____

Car Payments \$ _____

C.C. Payments \$ _____

Child Support \$ _____

Summary of Current Event

Have you applied for loan modification? _____

What were you told or was offered to you when applied for a modification? _____

Were you told terms that resulted in something different than initially stated? _____

How would you describe the calls, mailings and collection efforts of your lender? _____

Have you contacted any other agencies/modification for assistance? If so, who and what was the result?



Have you filed any complaint forms with any governing agencies? If so, what was the response?

Have you consulted with an attorney? If so, what were you advised?

Anything additional you would like to share?

Referred by: _____ Phone (____) _____

Date of Submission to ALS _____

On _____ of _____ 20____, information has been completed and submitted by:

Print Client Name

Print Client Name

Client Signature

Client Signature



Documents Required:

- Lending documentation from origination:
 1. Loan Application (form 1003).
 2. UW Transmittal (form 1008).
 3. Good Faith Estimate (GFE) or Initial HUD1.
 4. Final HUD1 or Settlement Statement
 5. Notice rights to cancel or rescind.
 6. Borrower(s) credit report at time of application.
 7. Borrower(s) mortgage payment history since inception.
 8. All initial applicable disclosures.
- Escrow Instructions and all amendments to escrow instructions.
- Purchase contract and amendments (if applicable)
- Tax return for prior year to Loan application (form 1040)
- Copies of appraisal report and all update reports.
- All correspondents from Lenders.
- Loan modification and/or loan work-out agreement (if applicable).
- Additional Helpful Documents:

Notice of Default (NOD) (if applicable) and date filed: _____

Notice of Trustee Sale (NOS) (if applicable) date filed: _____

Notice to Quit (if applicable), date received : _____ How was it served : _____

Unlawful Detainer (if applicable), (**) important: when was it served: _____

Submitting Office Information:

Agent Name or Referral Name

Phone Number

Manager Name

Phone Number