

**Homeownership Protection Center  
Unemployment Bridge Loan Program**

**Re-evaluation Checklist and Invoice**

Name of Client(s): \_\_\_\_\_ HPC # \_\_\_\_\_ Date: \_\_\_\_\_

Date of Re-Employment: \_\_\_\_\_

| Documents Needed for Re-Evaluation:  |                                   |
|--|-----------------------------------|
| Letter from Employer detailing start date, pay rate, and hours worked.<br>-OR-<br>Date of hire and new employer's full name, address and phone number.<br>-AND-<br>First paycheck stub from new employer |                                   |
| Counselor's Calculations   | Underwriter's Calculations        |
| Pre-Event Income:<br><br>\$ _____  | Pre-Event Income:<br><br>\$ _____ |
| Current Income:<br><br>\$ _____  | Current Income:<br><br>\$ _____   |

**Reduction of Employment Income (15% or more)** Yes    No

\*\*Remember, to qualify based on "Under-employment, borrowers must demonstrate at least a 15% reduction in employment income.

**Counselor's Recommendation:**

\_\_\_\_\_ Borrower does qualify to continue UBP.

\_\_\_\_\_ Borrower does NOT qualify for UBP.

**Underwriter's Decision:**

\_\_\_\_\_ Borrower does qualify to continue UBP.

\_\_\_\_\_ Borrower does NOT qualify for UBP.

**Comments:**

\_\_\_\_\_  
Counselor has reviewed the additional information and determines the recommendation above.

Counselor Signature: \_\_\_\_\_

Counselor Email: \_\_\_\_\_

Date: \_\_\_\_\_ Counseling Agency: \_\_\_\_\_

- Fax to 502-564-7664 or email to [ubploans@kyhousing.org](mailto:ubploans@kyhousing.org), attn: UBP Re-Evaluations.
- **Reimbursement Claimed: \$100.00**
- **Be sure to keep a copy for your records.**

Underwriter Review: \_\_\_\_\_ Date: \_\_\_\_\_