Documents Needed for Prepurchase Appointment

- 1. Intake application (attached)
- 2. Detailed list of all monthly expenses (budget template attached)
- 3. Credit Report Authorization (attached)
- 4. Proof of income for the last 2 months / most recent benefit statements
- 5. Two most recent bank statements, all pages
- 6. All recent household bills including utility, water, gas, cable, phone, etc.
- 7. W2s for the last 2 years
- 8. Picture ID

Please return all documents to our office in person once <u>ALL DOCUMENTS</u> are ready to be reviewed. The counselor will reach out to you to schedule an appointment to come in to meet with her in person.

HUD CERTIFIED HOUSING
COUNSELING AGENCY

Financial Literacy Homebuyer Education Down Payment Assistance NCHFA Community Partners Loan Pool NCHFA Urgent Repair Program Foreclosure Prevention Assistance

EDUCATE, EMPOWER AND AFFIRM



Home Solutions of Davidson County 21 W. Second St. Lexington, North Carolina 27292 336.236.1675 Homesolutionsdcnc.org



CLIENT PROFILE

Lexington__Thomasville _

Name	Social S	Security #	Date of Birth
Co-Borrower/Spouse Name	Social S	Security #	Date of Birth
Address	City	State	Zip-code
Phone # (Home)	Charles of the Control of the Contro		Phone # (Work)
Co-Borrower/Spouse Phone # (H	ome)		Phone # (Work)
Marital Status: Married Legally Dependents:	/ Separated Di	vorcedWidowed	l Single
Name/Age		Name/Age	
RESIDENTIAL INFORMATION			
Name of Current Landlord/ Loan	Servicer	· · · · · · · · · · · · · · · · · · ·	
Address of Current Landlord			
Monthly rent payment \$ {	Jtilities\$	Time lived at above	e address
If less than two years previous ad			
Previous Address	City	/State/Zip-code	Dates
Are you currently residing in publ	ic housing? Yes_	No	
Section 8 Voucher Yes N Are you currently participating Yes No If yes, name of program & agency:	in any self-suffic	ciency program su	ch as Family Self-Sufficiency?
If yes, name of program & agency: Date entered program	FSS Action F	lan on File Yes	No Payised 09/16/2021

EMPLOYMENT AND INCOME Applicant's Income: Hourly rate: \$_____Week \$____Semi-Monthly \$____ Bi-weekly \$_____Monthly \$_____Annual \$____ Employer Address: (Personnel Department) Hours per week ______ Length of time at Current Employment _____ If less than two years, previous employment: Previous Employment Dates of Employment Address of Previous Employer City/State Zip-code **Co-Owner/Spouse Income:** Applicant's Income: Hourly rate: \$_____Week \$____Semi-Monthly \$ Bi-weekly \$_____ Monthly \$____ Annual \$___ Employer Address: (Personnel Department) Hours per week _____ Length of time at Current Employment ____ If less than two years, previous employment: **Previous Employment** Dates of Employment Address of Previous Employer City/State Zip-code **Other Income Sources:** Other Employment (Part-Time, etc.) \$_____ Child Support Received Monthly \$_____ Social Security/Disability/Pension: Amount: \$_____Source: ____ Other: \$______ Source: _____ TOTAL INCOME FROM ALL SOURSES: Per Month Annual \$___

ASSETS AND LIABILITIES

How many vehicles do you own?	
Vehicle 1 Value Loan Balance	
Vehicle 2 Value Loan Balance	_
First Time Homebuyer Yes No	•
Do you own a home? Yes No Home Value _	Mortgage Balance
Do you own any other homes? Yes No Value	Mortgage Balance
Do you own a business? Yes No Business Value	e Business Loan Amount
Do you own rental property or land? Yes No F	Property ValueLoan Amount
Do you own any stocks, bonds, 401K, IRA, or any o	other investments? Yes No
Stock Value	
Do you have a checking account? Yes No	Amount in checking
Do you have a savings account? Yes No	Amount in savings
Do you have past due household bills? Yes No	Amount past due
Do you have credit card bills? Yes No	Credit Card Balance
Do you have student loans? Yes No	Balance
Do you have medical bills? Yes No	Balance
Do you have any outstanding personal loans? Yes	No Balance

INFORMATION FOR GOVERNMENT MONITORING PURPOSES

The following information is requested by the Federal Government for certain types loan applications related to a dwelling, in order to monitor compliance with equal credit opportunity, fair housing and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so.

EQUAL OPPORTUNITY INFORMATION

Home Solutions of Davidson County prohibits discrimination on the basis of sex, familial status, race, color, religion, national origin, age or disability. The requested information below is voluntary and failure to supply this information will not affect you as an applicant. The sole purpose of this information is to measure the success of our homeownership funding efforts in reaching all segments of the population, and to comply with the Fair Housing Laws.

Age Range:	Gender:		
	Female	·	
18-24	Male		
25-34			
35-54 55 & Over		•	
BORROWER		CO-BORROWER	
I do not wish to furn	ish this information	I do not wish to furnish this informa	ation
RACE/NATIONAL ORIGI	N:		
Borrower		Co-Borrower	
American Indian		American Indian	
Black, Non-Hispanic		Black, Non-Hispanic	
White, Non-Hispanic		White, Non-Hispanic	
Hispanic		Hispanic	
Asian		Asian	
Other		Other	•
CERTIFICATION			
misleading information ma	ay be grounds for rejec	and true to the best of my knowledge. I unde tion of my application. I understand that the for housing or housing assistance programs	e completion of this
I/we hereby authorize the Davidson County:	release of any personal	on Release Authorization I and financial information requested by Hor	ne Solutions of
	Employment a	Verification and Income records ount deposits and balances	
Applicant's Signature			Date
Co-Applicant's Signature			Date
Counselor Signature	<u> </u>	Add to the second of the secon	Date

Disclosure Statement

Home Solutions offers both, counseling and workshops in the topics described below.

Counseling is one-on-one sessions with clients to review and assess specific situation.

Workshops are held with more than one participant and cover general information on the specific topic.

Pre-Purchase Homeownership Counseling/Workshops:

- A service to assist individuals in developing a personalized plan that explores options and resources to achieve homeownership. We
 review all aspects of purchasing a home as well as reviewing their budget, debt and credit reports. The client is provided a copy of
 the budget and action plan designed to support the goal of homeownership Non-delinquency Post Purchase Workshop for
 Homeowners/Workshops:
- A free service to assist individuals to ensure successful homeownership through effective budgeting, equity preservation, and
 safeguards to protect their investment. Topics include making mortgage payments a priority, issues of default and foreclosure and
 loss mitigation. Counseling services are conducted face-to-face or by telephone at the client's request.

Pre-Purchase Homebuyer Education Workshops:

An 8 hour workshop which addresses the important aspects of the home buying process including; qualifying for a mortgage, the
application process, shopping for a home and the closing process. Expert speakers include lenders, realtors, attorneys, home
inspectors and HSDC educational staff that discuss budgeting and credit. A certificate of completion is provided to each participant.
The workshops are conducted face-to-face.

Financial Management/Budget Counseling/Workshops:

 A free service to assist individuals and families in setting up a monthly budget. HSDC reviews the client's income, credit report, expenses, budget, savings capability and assists in putting together an action plan that meets their needs.

Rental Housing Counseling/Workshops:

A free service to assist individuals who are looking to rent. HSDC helps clients create a budget and action plan in order to better
understand what they can afford. HSDC also educates potential renters about leases and what to expect when becoming a renter.
Counseling services are conducted face-to-face or by telephone at the client's request.

Services for Homeless Counseling/Workshops:

A free service to assist clients with emergency shelter options, transitional housing information, and providing referrals for other
programs within our community. Counseling services are conducted face-to-face or by telephone at the client's request.

Mortgage Delinquency & Default Resolution Counseling/Workshops:

• A free service to help homeowners who are past due with their mortgage to determine the options available to avoid foreclosure. HSDC provides its clients guidance in identifying the cause of these problems, their motivation, resources and ability to resolve the problem. HSDC works with the client's and lenders in order to facilitate the communication that will assist with exploring best possible workout options for the homeowner. HSDC refers clients to Consumer Credit Counseling Services for comprehensive counseling to avoid foreclosure through additional programs not offered at HSDC. Counseling services are conducted face-to-face.

Home Maintenauce and Financial Management for Homeowners/Workshops:

Most cases of individuals seeking housing counseling need to undergo financial analysis in order to determine how the client manages his/her money and how the counselor can adequately assist him/her. The counselor will review income and expenses, how clients are spending their money, how a budget is created and credit and its implications. Counselor provides resources based on homeowners needs and may be able to schedule appointments with partner agencies if need. Counseling services are conducted face-to-face or by telephone at the client's request.

Disclosure Statement

I We understand that it is my/ our right and responsibility to decide whether to engage in any course of housing counseling with the Home Solutions of Davidson County and determine whether counseling is suitable for my/ our housing problem.

I/We understand that we are not obligated to receive, purchase or utilize any other services offered by Home Solutions of Davidson County y or its exclusive partners, in order to receive housing counseling.

I /We understand that h the Home Solutions of Davidson County as the discretion to charge reasonable fees for some counseling service, and that these fees will be explained to me prior to counseling. I further understand that fees will not be charged if they create a financial hardship and I will not be denied counseling if I cannot pay the fees.

I/ We understand that the Home Solutions of Davidson County CDC provides information on a broad range of housing programs and products and that the housing counseling I receive from Home Solutions of Davidson County in no way obligates me to choose any particular loan product or housing program discussed in my counseling sessions.

I/We understand that Home Solutions of Davidson County does not guarantee that I/we will receive mortgage financing from any lender and/or other mortgage financing entity.

I/We may be referred to other housing services of the organization or to other agencies as appropriate that may be able to assist with particular concerns that have been identified. I understand I am not obligated to use any of the services offered to me.

I/We understand that a counselor may answer questions and provide information but cannot give legal advice. If I want legal advice, I will be referred for appropriate assistance.

I have reviewed and understand the above Counseling Services Disclosure Statement

Client Signature	Date
Client Signature	Date
Counselor Signature	Date



Credit Report Authorization and Privacy Disclosure Form

I hereby authorize and instruct *Home Solutions of DC, NC*. (hereinafter " *HSDCNC*" to obtain and review my credit report. My credit report will be obtained from a credit reporting agency chosen by *HSDCNC*. I understand and agree that *HSDCNC* intends to use the credit report for the purpose of evaluating my financial readiness to purchase a home and/or to engage in post-purchase counseling activities.

My signature below also authorizes the release to credit reporting agencies of financial or other information that I have supplies to *HSDCNC* in connection with such evaluation. Authorization is further granted to the credit reporting agency to use a copy of this form to obtain any information the credit reporting agency deems necessary to complete my credit report.

In addition, in connection with	determining my ability to obtain a loan, I
	authorize
	do not authorize
and any information that I have provided, in have been produced based upon such infor	lenders and/or counseling agencies my credit report acluding any computations and assessments that rmation. These lenders may contact me to discuss a counseling agencies may contact me to discuss
I understand that I may revoke my consent	to these disclosures by notifying <i>HSDCNC</i> in writing.
Client's Name (Print)	Client's Name (Print)
Client's Signature	Client's Signature
Social Security Number	Social Security Number
Date	Date



Make a Budget

MONTH _____YEAR

Use this worksheet to see how much money you spend this month. Then, use this month's information to help you plan next month's budget.

Some bills are monthly and some come less often. If you have an expense that does not occur every month, put it in the "Other expenses this month" category.

IS 41			
Mi	y income this month		
Inc	come	Month	nly total
Pay	checks (salary after taxes, benefits, and check cashing fees)	\$	
Otl	ner income (after taxes) for example: child support	\$	
Tot	al monthly income	\$	0.00
		1	come
M	y expenses this month		
H.H.			
	Expenses	Month	nly total
. 800	Rent or mortgage	\$	
Z	Renter's insurance or homeowner's insurance	\$	
HOUSING	Utilities (like electricity and gas)	\$	
O	Internet, cable, and phones	\$	
	Other housing expenses (like property taxes)	\$	
		Ti	
0	Groceries and household supplies	\$	
FOOD	Meals out	\$	
Liba	Other food expenses	\$	
	Public transportation and taxis	\$	
O	Gas for car	\$	
H	Parking and tolls	\$	
R	Car maintenance (like oil changes)		
0	Car insurance	\$	
Z	Car loan	\$	
TRANSPORTATION	Other transportation expenses	\$	

Make a Budget

	Expenses	Monthly total
I	Medicine	\$
HEALTH	Health insurance	\$
I	Other health expenses (like doctors' appointments and eyeglasses)	\$
>	Child care	\$
2	Child support	\$
PERSONAL AND FAMILY	Money given or sent to family	\$
Z	Clothing and shoes	
AL	Laundry	\$ \$ \$
Z	Donations	\$
RS	Entertainment (like movies and amusement parks)	\$
D.	Other personal or family expenses (like beauty care)	\$
hi	Fees for cashier's checks and money transfers	Ś
2	Prepaid cards and phone cards	\$
FINANCE	Bank or credit card fees	\$ \$ \$
LL.	Other fees	\$
CY	School costs (like supplies, tuition, student loans)	\$
OTHER	Other payments (like credit cards and savings)	¢
O	Other expenses this month	\$ \$
	Total monthly expenses	\$ 0.00
	istal monany expenses	Expenses
		Expenses
	\$ 0.00 - \$ 0.00 = \$ 0.00	10
	Income Expenses	,0

Maybe your income is more than your expenses. You have money left to save or spend.

Maybe your expenses are more than your income. Look at your budget to find expenses to cut.

Print Form