



HomeOwnership Center Universal Intake Form

Services interested in (check all that apply):

First Time Homebuyer _____ Down Payment Assistance _____ Credit/Budget Management _____

Foreclosure Prevention _____ Mortgage Rate Reduction _____ Mediation Services _____

Participant's Personal Information:

Name: _____ Referred By: _____

Date of Birth: _____ Social Security Number: _____ - _____ - _____

Address: _____

City: _____ State: _____ Zip: _____ County: _____

Own: _____ Rent: _____ Live w/relatives: _____ Other: _____ How long: _____ Monthly PMT: _____

Home Phone #: _____ Cell Phone #: _____ Best Contact: Home _____ Cell _____

E-mail Address: _____

Please Mark the Correct Answer:

Highest Level of Education: High School/GED: _____ AA/AS: _____ BA/BS: _____ MA/MS: _____

Gender: Male _____ Female _____ **Ethnicity:** Hispanic _____ Non-Hispanic _____

Race: African American _____ American Indian/Alaskan Native _____ Asian _____ Asian and White _____

Caucasian _____ Native Hawaiian or Other Pacific Islander _____ Other Multiple Race _____

English Proficiency: Yes _____ No _____ **Marital Status:** Married _____ Single _____ Widowed _____ Divorced _____

Veteran: Yes _____ No _____ **Active Military:** Yes _____ No _____ **Disabled:** Yes _____ No _____

Income Information:

Employer: _____ **Work Phone:** _____

Start Date of Employment: _____ **Title:** _____

Gross Income (before taxes): \$ _____ per (circle one) **Week/ Bi-Weekly/ Month/ Bi-Monthly/Year**

Other Income:

Unemployment: \$ _____ **Worker's Comp:** \$ _____

Child Support/Alimony: \$ _____ **TANF:** \$ _____

Social Security: \$ _____ **Disability:** \$ _____

Retirement/Pension: \$ _____ **Other:** \$ _____ **Type:** _____

Co-Participant's Personal Information (if applicable):

Name: _____ Relation to Participant: _____

Date of Birth: _____ Social Security Number: _____ - _____ - _____

Address (if different): _____

City: _____ State: _____ Zip: _____ County: _____

Own: _____ Rent: _____ Live w/relatives: _____ Other: _____ How long: _____ Monthly Payment: _____

Home Phone #: _____ Cell Phone #: _____ Best Contact: Home _____ Cell _____

E-mail Address: _____



Please Mark the Correct Answer:

Highest Level of Education: High School/GED: ___ AA/AS: ___ BA/BS: ___ MA/MS: ___

Gender: Male ___ Female ___ **Ethnicity:** Hispanic ___ Non-Hispanic ___

Veteran: Yes ___ No ___ **Active Military:** Yes ___ No ___ **Disabled:** Yes ___ No ___

Income Information:

Employer: _____ **Work Phone:** _____

Start Date of Employment: _____ **Title:** _____

Gross Income (before taxes): \$ _____ per (circle one) **Week/Bi-Weekly/Month/Bi-Monthly/Year**

Other Income:

Unemployment: \$ _____ **Worker's Comp:** \$ _____

Child Support/Alimony: \$ _____ **TANF:** \$ _____

Social Security: \$ _____ **Disability:** \$ _____

Retirement/Pension: \$ _____ **Other:** \$ _____ **Type:** _____

Total Number in Household: _____ *(Please list members of your household, including yourself)*

<u>Name:</u>	<u>Relationship</u>	<u>Sex</u>	<u>D.O.B.</u>

Please List Average Monthly Household Expenses:

	<u>Monthly Amount</u>
Rent or Mortgage	\$ _____
Property Taxes (if not escrowed)	\$ _____
Homeowners Insurance (if not escrowed)	\$ _____
Homeowners Association Dues	\$ _____
Car Payment(s)	\$ _____
Car Insurance	\$ _____
Auto Expenses (gas, maintenance)	\$ _____
Credit Cards	\$ _____
Child Care, Alimony, Child Support	\$ _____
Food (Groceries, Eating Out, Snacks)	\$ _____
Utilities (Gas, Electric, Water/Sewer & Garbage)	\$ _____
Communications (Cell Phone, Telephone, Internet)	\$ _____
Miscellaneous Spending Money	\$ _____
Medical Expenses	\$ _____
Other Loans (Student/Home Equity, etc.)	\$ _____
TOTAL MONTHLY EXPENSES:	\$ _____



DISCLOSURES:

Interfaith Community Housing Delaware (ICHDE), also a NeighborWorks® HomeOwnership Center, is a nonprofit, HUD-approved comprehensive housing counseling agency. The housing counseling and group education services offered include:

- HUD-approved comprehensive pre-purchase homebuyer education classes to prepare prospective homebuyers to make informed decisions. Topics discussed include homebuyer readiness, money management, understanding credit, mortgage loans, shopping for a home, and home maintenance.
- HUD-approved homebuyer pre-purchase one-on-one counseling to cover the entire homebuying process. Counselors assist with developing custom action plans for potential homebuyers and creating sustainable budgets, as well as provide information regarding home inspections, issues that arise during homeownership, and other topics relevant to being a successful homeowner.
- HUD-approved one-on-one financial management/ budget counseling to help clients to manage their finances in order to maintain or improve their housing situation.
- HUD-approved one-on-one mortgage delinquency and default resolution counseling to assist homeowners in danger of or facing foreclosure.

ICHDE is providing Home Ownership Counseling for your benefit, and in this capacity its primary responsibility is to you. **ICHDE** also develops or rehabs single-family homes for sale and owns units available for rent. In such cases, its primary responsibility is to itself. This creates a dual agency relationship between you and **ICHDE**, should you be interested in purchasing an **ICHDE** home or renting an **ICHDE** unit. By signing this form, you consent to **ICHDE**'s operating in a dual-agency capacity (if applicable) and acknowledge that as a seller or property owner, **ICHDE** may be acting in its own best interests. If you wish, you may retain the services of a real estate agent or a counselor who will represent only your interest in the transaction.

ICHDE makes our clients aware of products and/or services that we believe offer good value to our clients. We serve all clients regardless of income, race, color, religion/creed, sex, national origin, age, family status, disability, or sexual orientation/gender identity. We administer our programs in conformity with local, state, and federal anti-discrimination laws, including the federal Fair Housing Act (42 USC 3600, et seq.) These products and/or services might be available directly from **ICHDE**, lenders, developers, or other agencies with which **ICHDE** has a working relationship, including, but not limited to, the following program funding partners:

- Alliance Data a/k/a World Financial (Comcnity)
- Delaware State Housing Authority
- HSBC
- JPMorgan Chase
- M&T Bank
- Mon Valley Initiative
- NeighborWorks America
- New Castle County of Delaware
- PNC Bank
- TD Charitable Foundation
- United Way of Delaware
- U.S. Department of Housing and Urban Development

You are under no obligation to use the products and/or services identified by **ICHDE** whether from us or from industry partners. **ICHDE** provides real estate development, and you are under no obligation to purchase any of **ICHDE** properties. Please understand that you are free to choose any lender, lending/financing product, rental unit or home, from any entity regardless of the recommendations made by the **ICHDE** representative and still participate in our counseling program.



It is your right and responsibility to decide whether to engage in any course of counseling with **ICHDE** and to determine whether the counseling is suitable for you. The individualized action plan and direction of our counseling sessions will be based on the case management plan that we will develop together. The means to accomplish the outcomes and goals of your plan will evolve mutually between us and should be reviewed regularly during our counseling sessions. Additionally, you are under no obligation to obtain a mortgage, purchase a home or rent an apartment or house and have the option to terminate the counseling program at any time and for any reason.

No **ICHDE** employee, officer, director, contractor, volunteer, or agent shall undertake any action that might result in, or create the appearance of, administering counseling operations for personal or private gain, provide preferential treatment for any person or organization, or engage in conduct that will compromise our agency's compliance with federal regulations and our commitment to serving the best interests of our clients.

I/We understand that **ICHDE** provides information and education on numerous loan products and housing programs and I further understand that the Housing Counseling I receive from **ICHDE** in no way obligates me to choose any of these particular loan products or housing programs.

By signing below, you certify that all information is true and correct to the best of your knowledge. You also acknowledge that you have read and understand the above disclosures.

Participant:

Signature: _____

Date: _____

Co-Participant:

Signature: _____

Date: _____



Privacy Policy

Interfaith Community Housing of Delaware (ICHDE) is committed to assuring the privacy of individuals and/or families who have contacted us for assistance. We realize that the concerns you bring to us are highly personal in nature. We assure you that all information shared both orally and in writing will be managed within legal and ethical considerations. Your “nonpublic personal information” such as your total debt information, income, living expenses and personal information concerning your financial circumstances, will be provided to creditors, program monitors, Housing and Urban Development (HUD) and others only with your authorization and signature on the Foreclosure Mitigation and/or Home Ownership Counseling Agreement. We may also use anonymous aggregated case file information for the purpose of evaluating our services, gathering valuable research information and designing future programs.

Types of Information that we gather about you:

- Information we receive from you orally, on applications or other forms, such as your name, address, social security number, assets, and income;
- Information about your transactions with us, your creditors, or others, such as your account balance, payment history, parties to transactions and credit card usage; and
- Information we receive from a Credit Reporting Agency, such as your credit history.

You may opt-out of certain disclosures

1. You have the opportunity to “opt-out” of disclosures of your nonpublic personal information to third parties (such as your creditors), that is, direct us not to make those disclosures.
2. If you choose to “opt-out”, we will not be able to answer questions from your creditors. If at any time, you wish to change your decision with regard to your “opt-out”, please notify ICHDE in writing.

Release of your information to third parties

1. So long as you have not opted-out, we may disclose some or all of the information that we collect, as described above, to your creditors, HUD or third parties where we have determined that it would be helpful to you, would aid us in counseling you, or is a requirement of grant awards which make our services possible.
2. We may also disclose any nonpublic personal information about you or former customers to anyone as permitted by law (e.g., if we are compelled by legal process).
3. Within the organization, we restrict access to nonpublic personal information about you to those employees who need to know that information to provide services to you. We maintain physical, electronic and procedural safeguards that comply with federal regulations to guard your nonpublic personal information.



HUD C.A.R.S. (*Client Activity Reporting System*)

HUD will follow strict rules to protect your confidentiality. The personal data collected; such as name and address, are protected by the Privacy Act. You will never be named in any reports; although your responses may be looked at individually by HUD, or contractors hired by HUD to collect and analyze the data, your name will not be associated with any analysis of the data. Only results from groups of people will be reported. Contractors to HUD are covered by the same requirements to protect privacy as HUD staff and must demonstrate that they have systems in place to protect against data disclosure.

I also acknowledge that I have received a copy of ICHDE's Privacy Policy and I understand that I may revoke my consent to these disclosures by notifying ICHDE in writing.

Client signature

Date

Co-Client signature

Date



CLIENT CONFLICT OF INTEREST DISCLOSURE STATEMENT

From time to time **Interfaith Community Housing Delaware (ICHDE)**, also a NeighborWorks® HomeOwnership Center, makes our clients aware of products and/or services that we believe offer good value to our clients. We serve all clients regardless of income, race, color, religion/creed, sex, national origin, age, family status, disability, or sexual orientation/gender identity. We administer our programs in conformity with local, state, and federal anti-discrimination laws, including the federal Fair Housing Act (42 USC 3600, et seq.) These products and/or services might be available directly from **ICHDE**, lenders, developers, or other agencies with which **ICHDE** has a working relationship, including but not limited to the attached list. You are under no obligation to use the products and/or services identified by **ICHDE** whether from us or from industry partners. **ICHDE** provides real estate development, and you are under no obligation to purchase or rent any of **ICHDE** properties. Please understand that you are free to choose any lender, lending/financing product, rental unit or home, from any entity regardless of the recommendations made by the **ICHDE** representative and still participate in our counseling program. It is your right and responsibility to decide whether to engage in any course of counseling with **ICHDE** and to determine whether the counseling is suitable for you. The individualized action plan and direction of our counseling sessions will be based on the case management plan that we will develop together. The means to accomplish the outcomes and goals of your plan will evolve mutually between us and should be reviewed regularly during our counseling sessions. Additionally, you are under no obligation to obtain a mortgage, purchase a home or rent an apartment or house and have the option to terminate the counseling program at any time and for any reason.

No **ICHDE** employee, officer, director, contractor, volunteer, or agent shall undertake any action that might result in, or create the appearance of, administering counseling operations for personal or private gain, provide preferential treatment for any person or organization, or engage in conduct that will compromise our agency's compliance with federal regulations and our commitment to serving the best interests of our clients.

I _____ (please print name) certify that I have read and understand the above statement. Any questions I may have had were previously discussed with my counselor and answered to my satisfaction. I have been provided with a copy of this disclosure statement.

Participant Signature: _____

Date: _____

Co-Participant Signature: _____

Date: _____



Counselor and Client Roles and Responsibilities:

Counselor's Roles and Responsibilities	Client's Roles and Responsibilities
<p>Reviewing your housing goal and your finances; which include your income, debts, assets, and credit history.</p> <p>Preparing a Client Action Plan that lists the steps that you and your counselor will take in order to achieve your housing goal.</p> <p>Preparing a household budget that will help you manage your debt, expenses, and savings.</p> <p>Your counselor is not responsible for achieving your housing goal, but will provide guidance and education in support of your goal.</p> <p>Neither your counselor nor ICHDE HOC employees, agents, or directors may provide legal advice.</p>	<p>Completing the steps assigned to you in your Client Action Plan.</p> <p>Providing accurate information about your income, debts, expenses, credit, and employment.</p> <p>Attending meetings, returning calls, providing requested paperwork in a timely manner.</p> <p>Notifying ICHDE HOC or your counselor when changing housing goal.</p> <p>Attending educational workshop(s) (i.e. pre-purchase counseling workshop) as recommended.</p> <p>Retaining an attorney if seeking legal advice and/or representation in matters</p>

Termination of Services: Failure to work cooperatively with your housing counselor and/or ICHDE HOC with result in the discontinuation of counseling services. This includes, but is not limited to, missing three (3) consecutive appointments.

_____/_____/_____ Client(s) Initials

I/We have reviewed the above and accept and agree to the above stated conflict of interest and disclosure policy. Every client is required to sign this statement, indicating they have read and understand its contents.

I/We _____ (please print name) certify that I/We have read and understand the above statement. Any questions I/We may have had were previously discussed with my counselor and answered to my satisfaction. I have been provided with a copy of this disclosure statement.

Client Signature

Date

Co-Client Signature

Date

Counselor Signature

Date



Authorization Release Form

I/We the undersigned do hereby authorize my/our real estate attorney's office to release a copy of our final Closing Disclosure statement to Interfaith Community Housing of Delaware immediately following the settlement of my/our new home for record keeping purposes.

Attorney Name: _____

Attorney: Address: _____

Attorney Phone Number: _____

Attorney Fax Number: _____

Client Name (Printed)

Client Name (Printed)

Client Signature and Date

Client Signature and Date

Counselor Signature



Revised October 2021



For Your Protection: Get a Home Inspection

You must make a choice on getting a Home Inspection. It is not done automatically.

You have the right to examine carefully your potential new home with a professional home inspector. But a home inspection is not required by law, and will occur only if you ask for one and make the arrangements. You may schedule the inspection for before or after signing your contract. You may be able to negotiate with the seller to make the contract contingent on the results of the inspection. For this reason, it is usually in your best interest to conduct your home inspection as soon as possible if you want one. In a home inspection, a professional home inspector takes an in-depth, unbiased look at your potential new home to:

- ✓ Evaluate the physical condition: structure, construction, and mechanical systems;
- ✓ Identify items that need to be repaired and
- ✓ Estimate the remaining useful life of the major systems, equipment, structure, and finishes.

The Appraisal is NOT a Home Inspection and does not replace an inspection.

An appraisal estimates the market value of the home to protect the lender. An appraisal does not examine or evaluate the condition of the home to protect the homebuyer. An appraisal only makes sure that that the home meets FHA and/or your lender's minimum property standards. A home inspection provides much more detail.

FHA and Lenders may not Guarantee the Condition of your Potential New Home

If you find problems with your new home after closing, neither FHA nor your lender may give or lend you money for repairs. Additionally, neither FHA nor your lender may buy the home back from you. Ask a qualified home inspector to inspect your potential new home and give you the information you need to make a wise decision.

Your Home Inspector may test for Radon, Health/Safety, and Energy Efficiency

EPA, HUD and DOE recommend that houses be tested and inspected for radon, health and safety, and energy efficiency, respectively. Specific tests are available to you. You may ask about tests with your home inspector, in addition to the structural and mechanical systems inspection. For more information: Radon -- call 1-800-SOS-Radon; Health and Safety -- see the HUD Healthy Homes Program at www.HUD.gov; Energy Efficiency -- see the DOE EnergyStar Program at www.energystar.gov.

Selecting a Trained Professional Home Inspector

Seek referrals from friends, neighbors, other buyers, realtors, as well as local listings from licensing authorities and local advertisements. In addition, consult the American Society of Home Inspectors (ASHI) on the web at: www.ashi.org or by telephone at: 1-800-743-2744.

I / We (circle one) have read this document and understand that if I/we wish to get a home inspection, it is best do so as soon as possible. The appraisal is not a home inspection. I/we will make a voluntary choice whether to get a home inspection. A home inspection will be done only if I/we ask for one and schedule it. Your lender may not perform a home inspection and neither FHA nor your lender may guarantee the condition of the home. Health and safety tests can be included in the home inspection if I/we choose.

(Signed) Homebuyer

Date

(Signed) Homebuyer

Date

