



Dear Future Homeowner:

We are very happy to help you with your Back to Work counseling. We at HEA are excited to see this program implemented. Life happens, and many times through no fault of our own we are faced with financial hardships. It is a program whose time has come. Over the last seven years we have seen so many families devastated by the recent downturn in the economy and high unemployment.

In an effort to assist the high number of future homeowners seeking this counseling, we ask you to fill out the attached **Intake Sheet** as completely as possible, the **Budget** using your current net income and debts, write a very short letter describing what the incident was that caused the financial hardship and attach your most recent paystub. Please scan or fax back to us. Once we receive this and your payment of **\$125.00** we will call you to set up your counseling session. **(Service fee of \$125.00 covers one single person or a married couple. Each additional person requires a separate \$125.00 fee).** This price includes the cost of a credit report. We can only use reports that we pull ourselves. For your convenience you can pay your fee on our website on the "Back to Work" tab.

It usually takes 3 to 5 business days from receipt of the above to get your appointment. We look forward to working with you and helping you bring back the American dream of home- ownership.

Sincerely,

Walter Walker Jr.

Director of Education and Counseling

9215 N. Florida Avenue, Suite 101 Tampa, FL 33612 PH: (813) 932-4663-FAX: (813) 932-4660
www.heausa.org



INTAKE SHEET

Date: _____ E-Mail address: _____

Applicant's Name: _____ M [] F []

Address: _____ City: _____ State: _____ Zip: _____

Household lives in a Rural area: _____ DOES NOT live in a Rural area: _____ Chose not to respond: _____

Phone: (Home) _____ (Work) _____ (Cell) _____

Would you like to schedule an appointment with our Counseling Agency? Yes ___ No ___

Best number to call to arrange an appointment during normal business hours Home: _____ Cell: _____

Applicant's S.S. No: XXX-XX-_____ Date of Birth: _____ Marital Status: M _ S _ D _ W _

Number of household members: _____ Number of household members below age 18: _____

Co-Applicant's Name: _____ M [] F []

Co-Applicant's S.S. No: XXX-XX-_____ Date of Birth: _____ Marital Status: M _ S _ D _ W _

Household is limited English Proficient: _____ IS NOT limited English Proficient: _____ Chose not to respond: _____

The following information is required exclusively for statistical purposes:

Table with columns for Applicant and Co-Applicant, including Race, Ethnicity, and Education sections.

Are you currently working? Yes ___ No ___ Is Co-applicant currently working? Yes ___ No ___

Income section for Applicant and Co-Applicant, including Hourly Rate, No. Hrs. per week, and Gross Monthly.

How Did You Find Out About This Workshop? Agency ___ Realtor ___ Friend ___ Other ___

Have you owned a home within the last 36 months (3 years) Yes ___ No ___

Are you working with a Lender? Yes ___ No ___ Please write their name and contact below

Lender Name: _____ Phone: _____

Are you working with a Realtor? Yes ___ No ___ Please write their name and contact below

Realtor Name: _____ Phone: _____

If you have signed a purchase contract: Date Signed: _____ Closing Date: _____

Note: All information requested is required by HUD or other agencies we report our activity. Please take the time to fully complete each item. If you have any questions please ask.



HOUSING AND EDUCATION ALLIANCE (HEA) values your trust and we are committed to the delivery of high quality services and to the responsible management, use and protection of personal information. This notice describes our policy regarding the collection and disclosure of personal information and our policies regarding conflict of interest. As a non-profit community development organization founded in 2002 with the mission of providing culturally sensitive (English and Spanish services) housing education, post purchase education, foreclosure prevention counseling, credit rebuilding, financial literacy education, back to work mortgage counseling, and other housing related programs offered by HEA in the future.

AUTHORIZATION, DISCLOSURES, POLICIES AND PRACTICES

CONFLICT OF INTEREST

HEA certifies that the staff and volunteers who will provide education or counseling services have no conflicts of interest due to relationships with servicers, real estate agencies, mortgage lenders and/or other entities who may stand to benefit from particular counseling outcomes.

Initial _____

HOUSING COUNSELING AGREEMENT

By participating in our homebuyer education, post purchase education, foreclosure prevention counseling, credit rebuilding, financial literacy or back to work mortgage counseling program, you are agreeing to receive counseling, education, information and application assistance, including computations, assessments and procurement of services, in connection with your pursuit of (a) a home purchase, (b) qualifying for a mortgage loan or other homebuyer assistance program (c) obtaining better loan terms with your current mortgage loan or (d) preventing a home foreclosure. While you are welcomed and encouraged to do so, you are in no way obligated to participate in any of our home partner services, grant programs, or other services. HEA is also not obligated to enroll you in any other program as a result of your participation in any homeownership education program. Each HEA program is administered separately and you should seek application information pertaining to your program of interest. I give permission for FCP program administrators and/or their agents to follow-up with me for the next 3 years for the purposes of program evaluation.

Initial _____

REAL ESTATE DEVELOPMENTS PROJECTS AND OTHER GRANT PROGRAMS

HEA may own and develop real estate property for the purpose of renting or selling to low-income families in relation to its mission of community development. Participating in HEA's Homeownership Education or counseling programs does not obligate you to purchase or rent any property owned by HEA and, HEA is in no way obligated to sell or rent you any of our development properties, provide you with any monetary assistance, or provide you with any additional services. Each service and program outside of Homeownership Education and Counseling is offered independently and has its own application, procurement process and participation guidelines.

Initial _____

PROGRAM FEE

A fee is assessed for enrollment in the homebuyer education seminar: \$50 per attendee. A fee for Housing Counseling is assessed at \$50 per hour. Back to Work Counseling is \$125.00 and Section 32/ High Cost Mortgage Counseling is \$150. Other fees may be charged for services provided by HEA.

Initial _____

CREDIT REPORT FEE

A Credit Report fee is assessed if your credit report is ordered by HEA. This fee will be the sole responsibility of the client. This fee may be waived if you meet very low income criteria and is not applicable for "foreclosure prevention" counseling services. FCP requires two credit reports, one at the beginning of counseling and one at the end.

Initial _____

FUNDING SOURCES

HEA receives its funding from a number of sources including but not limited to Banks and their Charitable Foundations. Some of whom would be National Council of La Raza (NCLR), Citi, Wells Fargo, Regions Bank, TD Bank, 3rd Federal Savings and Loan, JPMorgan Chase, Bank of America, PNC Bank, BB&T, Florida Housing Finance Corporation. You are under no obligation to obtain a loan or any other product or service from any of the afore mentioned lending institutions and are in fact, encouraged by HEA to shop around for loan product options which best suit your needs.

Initial _____

PRIVACY POLICY AND AUTHORIZATION

Personal information, as used in this notice, means information that identifies an individual personally and is not otherwise publicly available information. It includes personal financial information such as credit history, income, employment history, financial assets, bank account information and financial debts. It also includes your social security number and other information that you have provided us on any applications or forms that you have completed.

Initial _____

CONFIDENTIALITY AND SECURITY

We restrict access to personal information about you to those of our employees who need to know that information to provide products and services to you and to help them do their jobs, including making loan decisions, aiding you in obtaining loans from others, and financial counseling. We maintain physical and electronic security procedures to safeguard the confidentiality and integrity of personal information in our possession and to guard against unauthorized access. We use locked files, user authentication and detection software to protect your information. Our safeguards comply with federal regulations to guard your personal information.

Initial _____

INFORMATION WE COLLECT

We collect personal information to

- Support our financial fitness counseling,
- Assist in qualification for our affordable home development projects
- Perform a mortgage affordability assessment



- Assist you in shopping for and obtaining a home mortgage from a lender.

We collect personal information about you from the following sources:

- Information we receive from you on applications or other forms,
- Information we receive from a consumer reporting agency,
- Information we receive from independent third parties authorized by you to provide us with your information.

Initial _____

Information We Disclose

We may disclose the following kinds of personal information about you:

- Information we receive from you on applications or other forms, such as your name, address, social security number, employer, occupation, assets, debts, and income;
- Information we receive from consumer reporting agency, such as your credit bureau reports, your credit history, and your creditworthiness.

Initial _____

To Whom Do We Disclose

We may disclose your personal information to the following types of unaffiliated third parties:

- Financial service providers, such as companies engaged in providing home mortgage or home equity loans,
- Others, such as nonprofit and/or governmental organizations involved in community development, but only for program review auditing, research and oversight purposes.
- We may also disclose personal information about you to third parties as permitted by law.

Initial _____

Monitoring for possible fraud

Monitoring for possible fraud requires the identification of processes, controls and other procedures to mitigate risk, including an effective secure information system and appropriate monitoring and quality assurance activities. FCP has a fraud/waste reporting system for client to use if they suspect inappropriate activities occurring. The system can be accessed at:

<https://apps.floridahousing.org/StandAlone/OIGFWAForm/>.

Prior to sharing personal information with unaffiliated third parties, except as described in this policy, we will give you an opportunity to direct that such information not be disclosed.

Directing Us Not to Make Disclosures to Unaffiliated Third Parties

If you want to opt out, direct us not to make disclosures about your personal information (other than disclosures permitted by law) as described in this notice.

Please indicate in the box below your privacy choice:

In connection with determining my ability to obtain a mortgage loan, I (we)

- Authorize** **Do not authorize**

HEA to share with potential mortgage lenders, governmental agencies, National Council of La Raza (NCLR), Eric Salazar and/or Victor Burrola and/or other non-profit agencies my credit report and any information that I have provided, including any computations and assessments that have been produced based upon such information. I acknowledge that the information obtained will be used solely by HEA and NCLR for the purpose of creating a housing counseling plan. If authorized, these lenders may contact me to discuss loans for which I may be eligible for, and these non-profit and governmental agencies may contact me for program evaluation purposes or offer other services. I understand I may revoke my consent to these disclosures by notifying HEA Homeownership Program *in writing*.

Applicant's Signature

Co-applicant's Signature

Print Applicant Name Date

Print Co-Applicant Name Date

CREDIT REPORTING AUTHORIZATION

In connection with my request to receive housing counseling and my pursuit to (a) purchase real estate obtain a mortgage loan, and/or (b) receive mortgage delinquency counseling and/or post-purchase and refinance counseling, and (c) for review purposes lasting up to 3 years from the date of the initial counseling session.

I (we) _____ **Authorize** **Do not authorize**
HEA to obtain a copy of my/our credit report.

Applicant's Signature

Co-applicant's Signature

Print Applicant Name Date

Print Co-Applicant Name Date

MORTGAGE LOAN COMPARISON

The US Department of HUD, NCLR and HEA encourages each participant in our housing education or counseling programs to be fully informed regarding the terms and conditions of any mortgage loan you may apply. The US Department of HUD, NCLR and HEA suggests that you do your own independent research on the various types of mortgage loans, interest rates and terms associated with the specific loan you are applying and any other loan types you may be interested.

I certify that I have received 3 loan comparisons from HEA and copies of all disclosures.

Initial _____



HOME BUYER PRE-PURCHASE AND COUNSELING BUDGET

Applicant

Co-Applicant

I N C O M E

Net Monthly \$ _____
 Child Support \$ _____
 Alimony \$ _____
 Investment \$ _____
 Retirement Income \$ _____
 Other Assets \$ _____
TOTAL INCOME **\$ _____**

Net Monthly \$ _____
 Child Support \$ _____
 Alimony \$ _____
 Investment \$ _____
 Retirement Income \$ _____
 Other Assets \$ _____
TOTAL INCOME **\$ _____**

E X P E N S E S

Rent \$ _____
 Renter's Insurance \$ _____
 Auto Insurance \$ _____
 Auto Gas/Maintenance \$ _____
 Car Payment \$ _____
 Judgments \$ _____
 Credit Cards (Minimum) \$ _____
 Student Loan (Deferred) \$ _____
 Student Loan \$ _____
 Tuition \$ _____
 Phone \$ _____
 Other Insurance \$ _____

Child Support \$ _____
 Alimony \$ _____
 Food (Groceries) \$ _____
 Eating Out \$ _____
 Medicines (not covered) \$ _____
 Medical Bills(Not covered) \$ _____
 Recreation \$ _____
 Water/Sewer \$ _____
 Electricity \$ _____
 Cable/Internet \$ _____
 Cellular Phone \$ _____
 Other expenses \$ _____

TOTAL EXPENSES **\$ _____**



Check List

Intake _____

Budget _____

Last/Most Current Paystub(s) _____

Utility Bills _____

Payment method: PayPal _____ Money Order _____

Scan to: info@heausa.org
attn: Walter Walker

Fax to: (813) 932-4660

Mail to: 9215 N. Florida Ave., Suite 101
Tampa, FL. 33612
Attn: Back to Work