

Documents Needed for URP Appointment.

1. Intake application (attached)
2. Detailed list of all monthly expenses (budget template attached).
3. Proof of income for the last 2 months / most recent benefit statements
4. Two most recent bank statements, all pages
5. All recent household bills including utility, water, gas, cable, phone, etc.
6. Recent mortgage statement (if applies)
7. Proof of life-time rights if not on deed/mortgage
8. Picture ID

Please return all documents to our office in person once ALL DOCUMENTS 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.

Feel free to contact us if you have any questions.

(336) 236-1675

We look forward to working with you.

**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__

GENERAL INFORMATION *Date*

Name Social Security # Date of Birth

Co-Borrower/Spouse Name Social Security # Date of Birth

Address City State Zip-code

Phone # (Home) Phone # (Work)

Co-Borrower/Spouse Phone # (Home) Phone # (Work)

Marital Status: Married__ Legally Separated__ Divorced__ Widowed__ Single__

Dependents:

Name/Age	Name/Age
Name/Age	Name/Age
Name/Age	Name/Age
Name/Age	Name/Age

RESIDENTIAL INFORMATION

Name of Current Landlord/ Loan Servicer

Address of Current Landlord

Monthly **rent** payment \$_____ Utilities \$_____ Time lived at above address _____

If less than two years previous address:

Previous Address City/State/Zip-code Dates

Are you currently residing in public housing? Yes _____ No _____

Section 8 Voucher Yes _____ No _____ Amount Subsidized \$_____

Are you currently participating in any self-sufficiency program such as Family Self-Sufficiency? Yes _____ No _____

If yes, name of program & agency: _____

Date entered program _____ FSS Action Plan on File Yes _____ No _____

EMPLOYMENT AND INCOME

Applicant's Income: Hourly rate: \$ _____ Week \$ _____ Semi-Monthly \$ _____
Bi-weekly \$ _____ Monthly \$ _____ Annual \$ _____

Employer: _____

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: _____

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 SOURCES:

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** _____ Business Loan Amount _____

Do you own rental property or land? Yes No Property **Value** _____ Loan Amount _____

Do you own any stocks, bonds, 401K, IRA, or any 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
- Male

18-24

25-34

35-54

55 & Over

BORROWER

CO-BORROWER

I do not wish to furnish this information

I do not wish to furnish this information

RACE/NATIONAL ORIGIN:

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

I certify that all the above information is correct and true to the best of my knowledge. I understand that false or misleading information may be grounds for rejection of my application. I understand that the completion of this form does not guarantee loan approval, eligibility for housing or housing assistance programs.

Personal Information Release Authorization

I/we hereby authorize the release of any personal and financial information requested by Home Solutions of Davidson County:

- Rental Verification
- Employment and Income records
- Checking/savings account deposits and balances

Applicant's Signature

Date

Co-Applicant's Signature

Date

Counselor Signature

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 Maintenance 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 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 _____



Make a Budget

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.

MONTH _____ YEAR _____

My income this month

Income	Monthly total
Paychecks (salary after taxes, benefits, and check cashing fees)	\$ _____
Other income (after taxes) for example: child support	\$ _____
Total monthly income	\$ 0.00

Income

My expenses this month

	Expenses	Monthly total
HOUSING	Rent or mortgage	\$ _____
	Renter's insurance or homeowner's insurance	\$ _____
	Utilities (like electricity and gas)	\$ _____
	Internet, cable, and phones	\$ _____
	Other housing expenses (like property taxes)	\$ _____
FOOD	Groceries and household supplies	\$ _____
	Meals out	\$ _____
	Other food expenses	\$ _____
TRANSPORTATION	Public transportation and taxis	\$ _____
	Gas for car	\$ _____
	Parking and tolls	\$ _____
	Car maintenance (like oil changes)	\$ _____
	Car insurance	\$ _____
	Car loan	\$ _____
	Other transportation expenses	\$ _____



Make a Budget

	Expenses	Monthly total
HEALTH	Medicine	\$
	Health insurance	\$
	Other health expenses (like doctors' appointments and eyeglasses)	\$
PERSONAL AND FAMILY	Child care	\$
	Child support	\$
	Money given or sent to family	\$
	Clothing and shoes	\$
	Laundry	\$
	Donations	\$
	Entertainment (like movies and amusement parks)	\$
	Other personal or family expenses (like beauty care)	\$
FINANCE	Fees for cashier's checks and money transfers	\$
	Prepaid cards and phone cards	\$
	Bank or credit card fees	\$
	Other fees	\$
OTHER	School costs (like supplies, tuition, student loans)	\$
	Other payments (like credit cards and savings)	\$
	Other expenses this month	\$
Total monthly expenses		\$ 0.00
		Expenses

$$\begin{array}{ccccccc}
 \$ & 0.00 & - & \$ & 0.00 & = & \$ & 0.00 \\
 \text{Income} & & & \text{Expenses} & & & &
 \end{array}$$

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