



Neighborhood Economic Development Corporation

For office use ~ONLY~ Intake date: _____ Client # _____

Application

Homeownership Programs (Check One)

- Threshold** (\$65 materials fee covers unlimited individual guidance, three Bureau crédito report with scores, 16 hours of homeownership education)
- Threshold and ABC's of Homebuying** (\$100 materials fee covers Threshold as described above and ABC's of Homebuying class – see ABC's flyers for dates and details. ABC's requires separate registration form. A \$110 value. Discount applies only with up front purchase of both services)

Please answer all of the questions on this form as completely as you can.

If you have any questions please call the NEDCO office nearest to you:

Lane County = Eugene/Springfield and other areas: (541) 345-7106 OR Mapleton/Florence: 1-888-345-7106

Mid-Valley = Salem/Keizer area: (503) 779-2680 OR Woodburn: 1-877-320-1479

Date: _____

Applicant

Name _____
 Date of Birth _____
 Social Sec. # _____
 Home Phone _____
 Work Phone _____
 Cell Phone _____
 E-Mail _____

Co-applicant

Name _____
 Date of Birth _____
 Social Sec. # _____
 Work Phone _____
 Cell Phone _____

Address _____ City _____ State _____ Zip _____

How long at the current address? __Year(s) _____month(s)

If Above address is **less than two** years, complete the following:

Previous Address _____

City _____ State _____ Zip _____ How long at this address? _____Year(s) _____month(s)

How did you learn about the NEDCO program? _____

Have you owned a home within the last three years? _____When? _____

Family Information

How many people live with you? _____ Please list names and ages of household members:

<u>Name</u>	<u>Date of Birth</u>	<u>Relationship</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

U.S. Citizen? Yes No Permanent Resident? Yes No

Employment History (two years — if you require additional space, please attach a separate page)

Applicant

EMPLOYER _____
 Address _____
 City _____ State _____ Zip _____
 Business Phone (s) _____
 Position/Title _____
 Dates of Employment _____

Co-applicant

EMPLOYER _____
 Address _____
 City _____ State _____ Zip _____
 Business Phone (s) _____
 Position/Title _____
 Dates of Employment _____

EMPLOYER _____
 Address _____
 City _____ State _____ Zip _____
 Business Phone (s) _____
 Position/Title _____
 Dates of Employment _____

EMPLOYER _____
 Address _____
 City _____ State _____ Zip _____
 Business Phone (s) _____
 Position/Title _____
 Dates of Employment _____

Information for Government Monitoring Purposes

*The following is required by the Federal Government and other funding sources. You are not required to furnish this information, but are encouraged to do so. The law provides that NEDCO may discriminate neither on the basis of this information, nor on whether you choose to furnish it. **If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation.** If you do not furnish ethnicity, race, or sex, under Federal regulations, this organization is required to note the information on the basis of visual observation or surname. If you do not wish to furnish this information, please check the box below.*

Applicant

I do not wish to furnish this information
Please select BOTH Ethnicity AND Race:

Ethnicity:

- Hispanic or Latino
- Not Hispanic or Latino

Race:

- American Indian or Alaskan Native
- Asian
- Black or African American
- Native Hawaiian/Pacific Islander
- White

Gender:

- Female Male

Disabled:

- Yes No

Co-applicant

I do not wish to furnish this information
Please select BOTH Ethnicity AND Race:

Ethnicity:

- Hispanic or Latino
- Not Hispanic or Latino

Race:

- American Indian or Alaskan Native
- Asian
- Black or African American
- Native Hawaiian/Pacific Islander
- White

Gender:

- Female Male

Disabled:

- Yes No

Financial Information

Income:

Monthly Gross Employment Income (include self-employment income):
 Child Support:
 Disability:
 Workers Compensation:
 Public Assistance (AFS):
 Social Security:
 Other (Please explain): _____

<u>APPLICANT</u>	<u>CO-APPLICANT</u>
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____

TOTAL MONTHLY GROSS INCOME FOR ALL SOURCES:

TOTAL MONTHLY GROSS FOR APPLICANT AND CO-APPLICANT

\$ _____ (total:)
 \$ _____

YEARLY GROSS income

Total monthly net income from all sources:

TOTAL MONTHLY NET INCOME FROM ALL SOURCES (APPLICANT/CO-APPLICANT)

\$ _____ (total:)
 \$ _____

Monthly Expenses:

RENT

If on Section 8, please indicate **your portion** of the rent
 And **Section 8's portion** of the rent

\$ _____
 \$ _____
 \$ _____

Are you planning to buy with **Section 8**: Yes _____ No _____?

Public Housing? _____ if yes, name of complex? _____ # of bedrooms? 2-3-4-5 _____

Are you part of the FSS Program: Yes _____ No _____?

Account Information:

Checking Account:
Bank Name & Branch _____ Account Balance \$ _____

Savings Account:
Bank Name & Branch _____ Account Balance \$ _____

Other Accounts _____ Account Balance \$ _____

Education

Please circle highest level completed: 1-2-3-4-5-6-7-8-9-10-11-12 College/ Technical Training 1-2-3-4.
Please specify area of College/Technical Training: _____
Other training? _____

Other Information:

Do you have any past due bills? _____ (If yes, please attach explanation).
Have you ever filed a petition for bankruptcy? ____ When? _____ (If yes, please attach explanation).
Have you ever had anything repossessed? ____ When? _____ (If yes, please attach explanation).
Do you have any collections, garnishes or judgements outstanding? Please explain: _____

Are you co-signer on any other loans? _____ Please explain. _____
Do you currently have an IDA with another organization? _____ Which organization? _____
What is your savings goal amount and goal date for your IDA? _____

IMPORTANT:

Please write a brief narrative describing why you are interested in homeownership. Tell us about yourself, your personal interests, hobbies, community oriented activities, and experiences. Describe other skills you might have that may be useful as a homeowner and neighbor. Finally, please describe your future goals for yourself and your family. Attach another sheet of paper if you would like more space to write.

The information that has been provided on this application is true, complete, and correct to the best of my knowledge. I understand that this information is necessary to evaluate my housing needs and that providing false information will result in my disqualification from this and other programs sponsored by NEDCO.

I hereby authorize NEDCO to obtain a report of my credit history.

Applicant Signature _____ Date _____

Co-applicant Signature _____ Date _____

ALL INFORMATION IN YOUR APPLICATION IS SUBJECT TO VERIFICATION

The Neighborhood Economic Development Corporation (NEDCO) is offering a variety of homebuyer education and financial literacy courses to help families build assets and prepare for financial success. These programs include such programs as Threshold, VIDA and one time consultations.

We have found that it can be beneficial to our applicants if we can share information with other relevant agencies, lenders and other such organizations. Read the following "RELEASE: carefully, and if you wish, please sign below.

RELEASE OF INFORMATION

I/We hereby agree to allow NEDCO to share any information, including all crédito data relevant to our application for housing, matched savings funds, our participation in the Threshold or IDA program, with relevant agencies, organizations, any mortgage lenders or educational institution. Furthermore, I/We agree to allow other creditors, agencies, organizations, or any mortgage lenders to share information with NEDCO.

Signature

Print Name

Date

Signature

Print Name

Date

Is the policy of Neighborhood Economic Development Corporation (NEDCO) to affirmatively implement programs to ensure equal opportunity in housing for all persons regardless of race, color, religion, gender, sexual orientation, handicap, familial status or national origin.

*If you have any questions about this application,
Please contact a Homeownership Counselor at the NEDCO office nearest to you.*

Lane County: 541-345-0446
Florence or Mapleton: 1-888-345-7106
Mail complete application to:
NEDCO – Lane County Location
Attn: Homeownership Counselor
212 Main Street
Springfield OR 97477

Mid-Valley: 503-779-2680
Woodburn area: 877-320-1479
NEDCO – Mid-Valley Location
Attn: Homeownership Counselor
868 Commercial St SE
Salem, OR 97302

NOTE: Once NEDCO has received your application and payment NEDCO will contact you to set up an appointment. For your first meeting with a Homeownership Counselor, it will be necessary to bring with you **copies** of the following items: * **Do not bring original documents, Document will not be returned**

- Two months of your most current pay stubs
- Most recent checking and savings account statements
- Previous year's federal tax return and W2's
- Proof of other forms of income, such as: child support, alimony, social security, or disability benefits
- Documentation regarding any bankruptcies within the last two years
- Section 8 vouchers
- Divorce decrees
- If self employed, cash flow statements for current year to date
- Current driver's license or other Prof of identification

Without the necessary documentation we will be unable to properly evaluate your financial situation and may need to reschedule the appointment.

www.nedcocdc.org

Is the policy of Neighborhood Economic Development Corporation (NEDCO) to affirmatively implement, programs to ensure equal opportunity in housing for all persons regardless of race, color religion, gender, sexual orientation, handicap, familial status or national origin.

Privacy Policy

NEDCO is committed to assuring the privacy of individuals and/or families who participate in our counseling and education. We realize the information you give us is 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 will be shared with creditors, programs monitors and others only with your authorization and signature on the Foreclosure Mitigation 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 we gather about you:

- Information we receive from you orally, on applications or other forms, such as your name, address, social security Lumber, 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:

- You have the opportunity to “opt-out” of disclosures of your “nonpublic” personal information to tirad parties (such as your creditors), that is, direct us not to make those disclosures.
- If you choose to “opt-out”, we will not be Arlt to answer questions from your creditors. If at any time, you are giving us permission to share your information.

Release of your information to third parties:

- So long as you have not opted-out, we may disclose some ora ll the information that we collect, as described above, to your creditors or tirad parties where we have determined that it would further the purpose for which you sought our servicers, would aid us in counseling you, o ris a requirement of Grant awards which make our services possible.
- We may also disclose any nonpublic personal information about you or former participant to anyone as permitted by law (e.g., if we are compelled by legal process).
- 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.

I/We have read and understand the terms of the above policy:

Signature

Date

Signature

Date

Neighborhood Economic Development Corporation (NEDCO)
The Homeownership Center of Lane County

“Promoting Successful Homeownership”

Disclosure and Authorization To Release Information

I/we consent to release any information to NEDCO from social service agencies, government agencies, utility companies, landlords, employers, lending institutions, legal representatives, or other organization which would be deemed pertinent to my participation in NEDCO programs, and allow NEDCO to discuss or share relevant information with these entities.

I release NEDCO’s Board of Directors, officers and employees from any and all claims, demands and liability of any sort resulting from the release of such information.

This consent to disclose may be revoked by me at any time by written, signed and dated notice to NEDCO that consent is revoked. This consent (unless revoked earlier by me) will continue to be in effect for a period not to exceed one (1) year from today’s date.

I acknowledge that I am under no obligation, and am not required, to utilize any program or assistance which is available from NEDCO or NEDCO’s partners. I further understand that my participation in NEDCO counseling activities does not in any way obligate me to use NEDCO referred lenders, realtors, or other partners, or to purchase any NEDCO real estate, business service or product.

AUTHORIZATION TO OBTAIN CREDIT REPORT

I/We hereby agree to allow NEDCO to obtain my three bureau credit report.

Print name

Print name

Signature

Date

Signature

Date