

Pensacola Habitat for Humanity

HUD Certified Housing Counseling Intake Packet & Application

Please fill out each section completely, sign and submit the packet and all required supporting documentation by email, mail, or drop the documents in the document drop box at our main office. If you have an additional person in your household (i.e., spouse, partner, sibling, etc.) and they will be attending housing counseling sessions with you, they will need to submit the documentation listed below AND complete the "Client 2" section of the application. PLEASE PROVIDE COPIES FOR OUR USE. WE DO NOT ACCEPT ORIGINALS. IF YOU ARE UNABLE TO GET ALL DOCUMENTS BEFORE YOUR SCHEDULED APPOINTMENT, PLEASE CALL US TO RESCHEDULE.

\square 3 most recent pay stubs (ensure they are recent and consecutive)
\square Most recent statement for all additional sources of income for everyone in the household (Social Security, SSI, Disability, Pension, Unemployment, Worker's Compensation, other family contributions, part time job, etc.)
\Box Copies of all pages of W2's, 1099s, schedules and forms for the last two (2) years tax returns signed and dated. Please include copies of tax return documentation for anyone in the household who is required to file
\square Copies of all pages of 12 months most recent and consecutive bank/credit union statements, for all accounts.
\square Copy of your state ID, driver's license or government issued photo ID
\square Copy of 8-hour pre-purchase certificate & recent credit report (if you have one)
IF YOU ARE SELF EMPLOYED
\Box Copies of all pages of W2's, 1099s, schedules and forms of last two (2) years tax returns signed and dated.
\square Copies of all pages of 12 months most recent and consecutive bank/credit union statements, for all accounts.
\square Copy of your state identification, driver's license or government issued photo ID
□ Copy of 8-hour pre-purchase certificate & recent credit report (if you have one)





	I CLIENT I	NFORMATION		
Name		Social security	number	
Date of birth	Phone numb	er	Email	
Gender:	Disability:		Veteran status:	
☐ Male ☐ Female	□Yes □N	lo	□Yes □No	
Race: □White □African Amer □Native Hawaiian/Pacific Islander □Am □Multi-racial □Other □Prefer not to	erican Indian/Ala	askan Native		anic -Hispanic fer not to answer
Language(s) spoken				
Marital status (check one):			Dependents:	
☐ Married ☐ Unmarried ☐ Separate	ed		No.: Ages: _	
Current address			Monthly rent \$	
Street:	\PT No.:			
City: Si	ate: Zip	code:	Time at present ac	ldress:
II EN	PLOYMENT AN	D/OR MONTHLY I	NCOME	
Current Employer Information Employer/company name: Street: State: City: State: Phone number: Your job title/position: Start date:	Zip:			
Gross monthly income Overtim	е		Bonus pay	
\$			\$	
		RCES OF INCOME	Τ	1
Child support Alimony \$		ial security	Pension	Other income
\$ \$ IF EMPLOYED FOR LESS	THAN 2 VEARS	AT CURRENT FME	\$ PLOVER COMPLETE B	\$ RELOW
Previous employer information Company name:				SELOW
Street:City:	 Stat	te: Zin:		
Phone number:				
Your job title/position:				
Dates employed here:			_	
Reason for leaving:			monthly income: \$	





III ASSETS AND LIABILITIES				
Assets: Bank accounts and/or c	ash on hand			
Name of bank	Type of account	Account number	Estimated current balance	
			\$	
			\$	
			\$	
			\$	
Liabilities: Credit Cards, car pay	ment, student loan, oth	er accounts	•	
Name of creditor	Type of liability (credit card, student loan, etc.)	Monthly minimum payment	Estimated balance you owe	
	Total debt	\$	\$	
Have you had a foreclosure or filed bankruptcy in the last seven (7) years? \Box Yes \Box No If yes, please provide more details below:				
Any outstanding judgments against you? \square Yes \square No If yes, please provide more details below:				





IV CURRENT HOUSING SITUATION				
\square Rent/leasing	☐ Rental assistance	☐Staying with family/f	riends \square At risk of for	eclosure Unhoused Other
V HOUSING/COUNSELING GOAL				
(Check all that ap	ply)			
☐ Purchase a hor	ne □Prevent f	oreclosure/eviction	□Create a budget	\square Improve my credit score
□ Discuss a fair housing issue □ Other (write in the space below)				





		I CLIENT 2	2 INFORMATIO	N	
Name			Social secu	urity number	
Date of birth		Phone numb	per	Email	
Marital status (check one):				Dependent	 S:
☐Married ☐Unmarried ☐	Separated	I			Ages:
Gender:		isability:		Veteran sta	
☐ Male ☐ Female		∃Yes □No		□Yes □	
Race:					Hispanic
□ Native Hawaiian/Pacific Islan			askan Native	Zermorey.	□ Non-Hispanic
□Multi-racial □Other □De					☐ Decline to answer
Language(s) spoken					Decline to answer
Language(s) spoken					
Current address				Monthly re	nt \$
Street:	ΑF	PT No.:		Wiening re	Ψ
				Time at pre	sent address:
City:	Sta	te: Ziı	o code:	· ·	
l	I CLIENT 2	EMPLOYMEN	IT AND/OR MO	ONTHLY INCOME	
Current Employer Information					
Employer/company name:					
Street:					
City:	State:	Zip:			
Phone number:					
Job title/position:					
Start date:	_				
	0 11				
Gross monthly income	Overtime			Bonus pay	
\$	\$	OTHER COL	IDCEC OF INCO	\$	
Child support	Alimony		JRCES OF INCO		Other income
Child support \$	Alimony \$	\$	cial Security	Pension \$	\$
·		<u>_ ' </u>	AT CURRENT	 EMPLOYER COMI	
Previous employer information		TIAN 2 TEANS	AT CORREINT	EIVII EOTEK COIVII	LETE BELOW
Company name:					
Street:					
City:		 Sta	te:	Zip:	
Phone number:					_
Job title/position:					
Dates employed here:					
				 oss monthly incor	ne· \$





III CLIENT 2 ASSETS AND LIABILITIES						
Assets: Bank accounts and/or	Assets: Bank accounts and/or cash on hand					
Name of bank	Type of account	Account number	Estimated current balance			
			\$			
			\$			
			\$			
			\$			
Liabilities: Credit Cards, Car pa	yment, student loan, oth	er accounts				
Name of Creditor	Type of liability (credit card, student loan, etc.)	Monthly minimum payment	Estimated balance you owe			
	Total Debt	\$	\$			





IV RENTAL HISTORY IF DIFFERENT THAN CLIENT 1 INFORMATION			
Name of landlord/management group	Address	Time living at this address	
		(move in date-move out date)	
Goals (Check all that apply)			
□ Purchase a home □ Prevent forect	osure/eviction	dget	
☐ Discuss a fair housing issue ☐ Other (w	rite in the space below)		





Client budget				
	Client budget	Revised	Savings	
	monthly	monthly	monthly	
Total household income	· .	Τ,	Ι,	
Gross monthly wages	\$	\$	\$	
Interest/dividends	\$	\$	\$	
Other income (SSI, Disability, Child Support)	\$	\$	\$	
Expenses Income total	 \$	\$	5	
Housing & utilities				
Mortgage/rent	\$	\$	\$	
Property taxes-monthly (no escrow)	\$	\$	\$	
Homeowner's insurance policy-monthly (no escrow)	\$	\$	\$	
Cell phone	\$	\$	\$	
Water	\$	\$	\$	
Electricity	\$	\$	\$	
Home repair	\$	\$	\$	
Home security	\$	\$	\$	
Garden supplies	\$	\$	\$	
Miscellaneous	\$	\$	\$	
Housing & utilities total	\$	\$	\$	
Daily living				
Groceries	\$	\$	\$	
Eating out	\$	\$	\$	
Childcare	\$	\$	\$	
Other-miscellaneous	\$	\$	\$	
Daily living total	\$	\$	\$	
Transportation				
Car payment	\$	\$	\$	
Gas	\$	\$	\$	
Car insurance	\$	\$	\$	
Repairs	\$	\$	\$	
Car wash/detailing	\$	\$	\$	
Parking	\$	\$	\$	
Uber/Lyft/zTrip	\$	\$	\$	
Public transportation	\$	\$	\$	
Transportation total	\$	\$	\$	



	Client budget	Revised	Savings
Entertainment	monthly	monthly	monthly
Cable/internet TV (Sling, etc.)	\$	\$	خ ا
			\$
Subscription streaming sites (Hulu, Netflix, etc.)	\$	\$	\$
Movie rental (online, etc.)	\$	\$	\$
Concerts, or other	\$	\$	\$
Entertainment total	\$	\$	\$
Health & wellness			
Gym membership	\$	\$	\$
Health insurance (out of pocket)	\$	\$	\$
Prescriptions	\$	\$	\$
Over-the-counter medication	\$	\$	\$
Mental health services (counseling, etc.)	\$	\$	\$
Co-pay/out-of-pocket	\$	\$	\$
Life insurance	\$	\$	\$
Health total	\$	\$	\$
Vacation/leisure			
Plane fare/transportation	\$	\$	\$
Lodging/housing	\$	\$	\$
Food	\$	\$	\$
Rental car	\$	\$	\$
Vacation total	\$	\$	\$
Recreation			
Child team dues	\$	\$	\$
Sports equipment, etc.	\$	\$	\$
Recreation total	\$	\$	\$
Dues/subscription services			
Magazines	\$	\$	\$
XM radio	\$	\$	\$
Charitable gifts/donations	\$	\$	\$
Dues/subscription services total	\$	\$	\$





	Client budget monthly	Revised monthly	Savings monthly
Personal			_
Clothing	\$	\$	\$
Gifts	\$	\$	\$
Salon/barber	\$	\$	\$
Nail salon	\$	\$	\$
Books	\$	\$	\$
Spotify, Apple Music, Amazon Music, etc.	\$	\$	\$
Personal Total	\$	\$	\$
Savings/debt Obligations			
Long-term savings	\$	\$	\$
Retirement (401k, IRA)	\$	\$	\$
Credit card payments	\$	\$	\$
Student loans	\$	\$	\$
Other debt obligations	\$	\$	\$
Savings/debt total	\$	\$	\$
Total expenses	\$	\$	\$
Cash shortage/surplus	\$	\$	\$

Client(s) Signature:	Date:
	Date:
Counselor Signature:	Date:





HUD Housing Counseling Services Disclosure

Board of Directors

Mei Davis Chairwoman

Gene Franklin Vice Chairman

Michael King Treasurer

Dick Baker Secretary

Al Coby
Dawn Brazwell
Michele DuMond
Rabbi Joel Fleekop
Siobhan Gallagher
Mike Lanwehr
Matt Newcomer
Dr. Charles Reese
Betty Salter
Brent Hargett
Josh Womack

Sam Young
Chief Executive Officer





Our agency provides the following HUD one-on-one counseling services: pre-purchase/homebuying; financial management, budget and credit counseling; non-delinquent post purchase; mortgage delinquency and default resolution

Our agency also provided the following service and group education workshops: pre purchase/homebuyer education; financial, budget, and credit; non-delinquent post purchase

Our agency is an affordable home builder and sells homes to qualified applicants in Escambia and Santa Rosa Counties.

Our agency regulary receives funding through NeighborWorks America.

Clients seeking counseling services through Pensacola Habitat for Humanity are under no obligation to accept our product or any specific lender. The housing counseling services provided are in no way contingent upon using a particular loan product or service.

In addition, counselors provide information about relevant alternative lenders and products in Escambia and Santa Rosa Counties and the surrounding areas.

I/we agree Pensacola Habitat for Humanity, its employees, agents, and directors are not liable for any claims and causes of action arising from errors or omissions by such parties, or related to my participation in Pensacola Habitat for Humanity counseling; and I hereby release and waive all claims of action against Pensacola Habitat for Humanity and its affiliates.

I have read this document, understand that I have given up substantial rights by signing it, and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law. If any provision of this document is unenforceable, it shall be modified to the extent necessary to make the provision valid and binding, and the remainder of this document shall remain enforceable to the full extent allowed by law.





I have read and have received a copy of this disclosure.

Building stronger communities, one homeowner at a time. rethinkhabitat.org

In order to assess client satisfaction and in compliance with grant funding requirements, Pensacola Habitat for Humanity, or one of its partners, may contact you during or after the completion of your housing counseling service. You may be requested to complete a survey asking you to evaluate your client experience. Your survey data may be confidentially shared with Pensacola Habitat for Humanity grantors such as HUD or NeighborWorks America.

Client:	Date:	
Client:	Date:	
IF APPLICABLE: This disclosure was o	conveyed verbally via a virtual/telephonic s	session.
Certified Housing Counselor:	Date:	





AUTHORIZATION TO OBTAIN CREDIT INFORMATION

I hereby authorize Pensacola Habitat for Humanity (PHFH) and/or

	to pull my credit report in order to review				
Board of Directors	my credit file for housing counseling—pre-purchase/home buying, budget and				
Mei Davis	credit management, post-purchase, mortgage delinquency, and for assistance				
Chairwoman	with other related housing counseling goals;				
Gene Franklin	Provide information to lenders and government agencies in connection with my				
Vice Chairman	application for mortgage financing. Such information includes, without limitation,				
Michael King	credit history, employment history and income, tax returns, account information,				
Treasurer	and information regarding the property being purchased;				
Dick Baker					
Secretary	Verify my past and present employment earnings record, bank account, stock				
Al Caby	holding, and other assets balances that are needed to process my application. I				
Al Coby Dawn Brazwell					
Michele DuMond	information, including past and present landlord references;				
Rabbi Joel Fleekop	intermediation, materials past and present landiera references,				
Siobhan Gallagher	The information PHFH obtains is only to be used in the processing of my				
Mike Lanwehr Matt Newcomer	application and can be shared with various agencies that fund the PHFH HUD				
Dr. Charles Reese	Housing Counseling program.				
Betty Salter	riousing counseling program.				
Brent Hargett Josh Womack To establish "proper identification", as required by the Fair Credit					
Josh Womack	please complete the following identifying information and supply the consumer				
	interviewer with two (2) pieces of proper identification. It is understood that a				
Sam Young	photocopy of this form will also serve as authorization.				
Chief Executive Officer	photocopy of this form will also serve as authorization.				
	Name:				
	Name: Social Security Number:				
Natural Law Law	Telephone Number: ()				
NeighborWorks* CHARTERED MEMBER CHARTERED MEMBER CHARTERED MEMBER	Email:				
	Current Address:				
	City: State: Zip Code:				
	Previous address if less than two years at current address:				
	Frevious address in less than two years at current address.				
	I am the person named above, and I understand that Federal law provides that a				
	person who obtains information from a consumer-reporting agency under false				
	personal desired and a second				





pretense shall be fined not more than \$5,000.00 or imprisoned for not more than one year, or both.				
Client Signature	 Date			
Counselor Signature				





HUD Housing Counseling Privacy Notice

Board of Directors

Mei Davis Chairwoman

Gene Franklin Vice Chairman

Michael King Treasurer

Dick Baker Secretary

Al Coby
Dawn Brazwell
Michele DuMond
Rabbi Joel Fleekop
Siobhan Gallagher
Mike Lanwehr
Matt Newcomer
Dr. Charles Reese
Betty Salter
Brent Hargett

Sam Young
Chief Executive Officer





Pensacola Habitat for Humanity is committed to assuring the privacy of individuals and/or families who have contacted us for assistance. We assure you that all personal information shared orally and/or in writing will be managed within ethical and legal considerations. Additionally, we want you to understand how we use the personal information we collect about you. Please carefully review this notice as it describes our policy regarding the collection and disclosure of your nonpublic, personal information.

What is nonpublic, personal information?

- Information that identifies an individual personally and is not otherwise publicly available information, such as your Social Security Number or demographic data such as your race and ethnicity.
- Includes personal financial information such as credit history, income, employment history, financial assets, bank account information and financial debts.

What personal information does Pensacola Habitat for Humanity Housing Counseling Agency collect about you?

We collect personal information about you from the following sources:

- •Information that you provide on applications, forms, email, or verbally
- •Information about your transactions with us, 3rd party agencies we work with, or others
- •Information we receive from your creditors or employment references
- Credit Reports

What categories of information do we disclose and to whom?

We may disclose the following personal information to financial service providers (such as companies providing home mortgages), Federal, State, and nonprofit partners for program review, monitoring, auditing, research, and/or oversight purposes, and/or any other pre-authorized individual and/or organization. The types of information we disclose are as follows:





- Information you provide on applications/forms or other forms of communication. This
 information may include your name, address, Social Security Number, employer, occupation,
 account numbers, assets, expenses, and income.
- Information about your transactions with us, our affiliates, or others; such as your account balance, monthly payment, payment history, and method of payment.
- Information we receive from a consumer credit reporting agency; such as your credit bureau reports, your credit and payment history, your credit scores, and/or your creditworthiness.
- We do not sell or rent your personal information to any outside entity.
- We may share anonymous, aggregated case file information; but this information may not be disclosed in a manner that would personally identify you in any way. This is done in order to evaluate our program, gather valuable research information, and/or design future programs.
- We may also disclose personal information about you to third parties as permitted by law.

How is your personal information secured?

We restrict access to your nonpublic personal information to Pensacola Habitat for Humanity HCA employees who need to know that information in order to perform their housing counseling duties. We maintain physical, electronic, and procedural safeguards that comply with federal regulations to guard your nonpublic personal information; and we train our staff to safeguard client information and prevent unauthorized access, disclosure, or use.

Opting Out of Certain Disclosures

You may direct Pensacola Habitat for Humanity HCA to *not* disclose your nonpublic personal information to third parties (other than disclosures made to project partners and those permitted by law). However, if you choose to opt out, we will not be able to answer any questions from your creditors, which may limit Pensacola Habitat for Humanity HCA's ability to provide services such as foreclosure prevention counseling. If you choose to opt-out, please sign below under the "Opt-Out" clause. If you choose to release your information as stipulated in this Privacy Policy, sign under the "Release" clause. In the future, if you decide to change your decision please contact the HUD Housing Counselor you are working with in writing12.

OPT-OUT: I request that Pensacola Habitat for Humanity HCA make no disclosures of my nonpublic personal information to third parties other than project partners and those permitted by law. By choosing this option, I understand that Pensacola Habitat for Humanity will NOT be able to answer any questions from my creditors. I understand that I may change my decision any time by contacting Pensacola Habitat for Humanity HCA.





Name 1 (Printed)	Signature	Date	
Name 2 (Printed)	Signature	Date	
Privacy Policy: I/we acknow Privacy Policy.	ledge that I/we received a co	py of Pensacola Habita	at for Humanity HCA's
Initials:/			
information it obtains abou	e Pensacola Habitat for Hum t me to my creditors and an cknowledge that I have read	third parties necessa	ry to provide me with
Name 1 (Printed)	Signature	Date	
Name 2 (Printed)		 Date	

Counselor's Roles and Responsibilities

- Reviewing your housing goal and your finances, which include your income, debts, assets, and credit history.
- Preparing a Client Action Plan that lists the steps that you and your counselor will take in order to achieve your housing goal.
- Preparing a household budget that will help you manage your debt, expenses, and savings.
- Your counselor is not responsible for achieving your housing goal, but will provide guidance and education in support of your goal.
- Neither your counselor nor other employees, agents, or directors of Pensacola Habitat for Humanity may provide legal advice.

Client's Roles and Responsibilities

- Completing the steps assigned to you in your Client Action Plan.
- Providing accurate information about your income, debts, expenses, credit, and employment.
- Attending meetings, returning calls, providing requested paperwork in a timely manner.
- Notifying Pensacola Habitat for Humanity or your counselor when changing housing goal.
- Attending educational workshop(s) (i.e. pre-purchase counseling workshop) as recommended.





Initials: ____/___

Building stronger communities, one homeowner at a time. rethinkhabitat.org

• Retaining an attorney if seeking legal advice and/or representation in matters such as foreclosure or bankruptcy protection.

Termination of Services: Failure to work cooperatively with your housing counselor and/or Pensacola Habitat for Humanity with result in the discontinuation of counseling services. This includes, but is not limited to, missing three consecutive appointments.