NEIGHBORHOOD HOUSING SERVICES OF DAVENPORT, INC.

# PERSONAL PROFILE INTAKE FORM

Purchase \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Rehab \_\_\_\_\_\_\_\_\_\_\_\_\_\_

## CUSTOMER:

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name |  |  |  |  |  |  | DOB |  |
| Social Security Number |  |  |  |  |  |  |  |  |
| Street Address |  |  |  |  |  |  |  |  |
| City |  | State |  | Zip |  |  |  |  |
| Cell Phone |  |  |  |  |  |  |  |  |
| Work Phone |  |  |  |  |  |  |  |  |
| Email Address |  |  |  |  |  |  |  |  |

*Marital Status (please circle) :*  Married Unmarried

##### Disabled? Yes No

*Renting? Please list landlord’s name and ph #:*

*Family/Household Size:\_\_\_\_\_\_\_\_\_*

*Household Members (include all)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name | SS# | Relationship | DOB | Age |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

Annual Family or Household Income: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(All household members over 18)

*Education (please circle one):*

Below High School Diploma Two-Year College Graduate Degree

High School Diploma or Equivalent Bachelors Degree

*Referred to Home Ownership Center by* (*please circle all that apply*):

Print Advertisement Bank Government TV

Staff/board member Walk-In Friend Radio

If you were referred by a bank, which one? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**EMPLOYMENT: NEED FULL 2 YEAR HISTORY OF EMPLOYMENT!**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Employer** |  |  |  |  |  |  | Hire Date |  |
|  |  |  |  |  |  |  |  |  |
| Street Address |  |  |  |  |  |  |  |  |
| City |  | State |  | Zip |  |  |  |  |
| Phone |  |  |  |  |  |  |  |  |
| Position |  |  |  |  |  |  |  |  |
| Average hours per week and hourly rate of pay |  |  |  |  |  |  |  |  |
| How often paid? |  |  |  |  |  |  |  |  |
| **Secondary Employer** |  |  |  |  |  |  | Hire Date |  |
| Street Address |  |  |  |  |  |  |  |  |
| City |  | State |  | Zip |  |  |  |  |
| Phone |  |  |  |  |  |  |  |  |
| Position |  |  |  |  |  |  |  |  |
| Average hours per week/hourly rate of pay |  |  |  |  |  |  |  |  |
| How often paid? |  |  |  |  |  |  |  |  |

**2 - CO-APPLICANT**:

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name |  |  |  |  |  |  | DOB |  |
| Social Security Number |  |  |  |  |  |  |  |  |
| Street Address |  |  |  |  |  |  |  |  |
| City |  | State |  | Zip |  |  |  |  |
| Home Phone |  |  |  |  |  |  |  |  |
| Cell Phone |  |  |  |  |  |  |  |  |
| Work Phone |  |  |  |  |  |  |  |  |
| Email Address |  |  |  |  |  |  |  |  |

**Co-applicant employer**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Employer |  |  |  |  |  |  | Hire Date |  |
| Street Address |  |  |  |  |  |  |  |  |
| City |  | State |  | Zip |  |  |  |  |
| Phone |  |  |  |  |  |  |  |  |
| Position |  |  |  |  |  |  |  |  |
| Rate of pay/Hrs per wk |  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Savings/Checking/Assets  Indicate Financial Institution | Type | Acct # | Balance | **Indicate 1 – Borrower, 2 – Co-Borrower, 3 Both, 4 – Other (explain which member of household)** | **List savings, checking, Savings**  **Certificates, Money Market funds, Equity in real property, Capital Investments, trusts that are available to household, IRA, KEOGH, and similar retirement**  **Savings accounts; company** |
| *Example: Bank of Midwest* | *Savings* | *654321* | *100.00* | *3 joint* | **Retirement/pension funds that** |
|  |  |  |  |  | **Can be withdrawn without retiring** |
|  |  |  |  |  | **Or terminating employment;** |
|  |  |  |  |  | **Inheritances, capital gains, lottery** |
|  |  |  |  |  | **Winnings, insurance settlements** |
|  |  |  |  |  | **Personal property held as an** |
|  |  |  |  |  | **Investment (gems, jewelry, coin collections, antique cars, etc.); cash value life insurance policies.** |

Other sources of income?

Social Security: Amount received per month:$\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child Support: Amount received per month:$\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Public Assistance: Amount received per month:$\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FOR THE ABOVE SOURCES OF INCOME, YOU MUST PROVIDE DOCUMENTATION – (i.e. AWARDS LETTER FOR SOCIAL SECURITY, COURT ORDER FOR CHIILD SUPPORT)**

Other assets?

Retirement accounts: Value of account/vested balance $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\*For retirement accounts, please provide all pages of your most recent statement!**

Cash on hand: Amount saved $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Feel free to list any other sources of income or assets not covered

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ADDITIONAL INFORMATION

###### CUSTOMER CO-APPLICANT

*Have you owned a home in the last three (3) Years? Yes No Yes No*

*Are you a Veteran Yes No Yes No*

*Do you have a contract on a house at this time? Yes No*

*Are you currently working with a real-estate agent? Yes No*

NHS of Davenport does business in accordance with the Federal Fair Housing Law which states that all people have freedom from discrimination because of race, color, religion, creed, sex, sexual orientation, gender identity, national origin or ancestry, age, mental or physical disability, marital status and familial status (in housing only) in the areas of employment, housing, public accommodation and credit.

AUTHORIZATON

*I authorize NHS Home Ownership Center to:*

*(a) pull my credit report to review my credit file for housing counseling in connection with my pursuit on a loan to purchase real property or a rehab loan to repair real property.*

*(b) pull my credit report and review my credit file for informational inquiry purposes; and*

*(c) obtain a copy of the HUD-1 settlement statement when I purchase a home from the lender who makes me a loan or the title company that closes the loan.*

*(d) request and obtain verifications related to employment, rental/mortgage payment history, deposit, and benefits.*

*(e) multiple credit report charges may be required for the processing / final approval of this file.*

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Customer Date*

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Co-Applicant Date*

Each of the undersigned specifically represents to Lender and to Lender's actual or potential agents, brokers, processors, attorneys, insurers, servicers, successors and assigns and agrees and acknowledges that: (1) the information provided in this application is true and correct as of the date set forth opposite my signature and that any intentional or negligent misrepresentation of this information contained in this application may result in civil liability, including monetary damages, to any person who may suffer any loss due to reliance upon any misrepresentation that I have made on this application, and/or in criminal penalties including, but not limited to, fine or imprisonment or both under the provisions of Title 18, United States Code, Sec. 1001, et seq.; (2) the loan requested pursuant to this application (the "Loan") will be secured by a mortgage or deed of trust on the property described in this application; (3) the property will not be used for any illegal or prohibited purpose or use; (4) all statements made in this application are made for the purpose of obtaining a residential mortgage loan; (5) the property will be occupied as indicated in this application; (6) the Lender, its servicers, successors or assigns may retain the original and/or an electronic record of this application, whether or not the loan is approved; (7) the Lender and its agents, brokers, insurers, servicers, successors and assigns may continuously rely on the information contained in the application, and I am obligated to amend and/or supplement the information provided in this application if any of the material facts that I have represented herein should change prior to closing of the Loan; (8) in the event that my payments on the Loan become delinquent, the Lender, its servicers, successors, or assigns may, in addition to any other rights and remedies that it may have relating to such delinquency, report my name and account information to one or more consumer credit reporting agencies; (9) ownership of the Loan and/or administration of the Loan account may be transferred with such notice as may be required by law; **Acknowledgement. Each of the undersigned hereby acknowledges that any owner of the Loan, its servicers, successors and assigns, may verify or reverify any information contained in this application or obtain any information or data relating to the Loan, for any legitimate purpose through any source, including a source named in this application or a consumer reporting agency.**

**This worksheet must be completed in entirety in order to be considered for program consideration.**

**How many people live in your household?\_\_\_\_\_\_\_\_\_\_\_**

**What is the total income of your household? $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(This amount includes income from wages, salaries, child support, social security, pensions, and public assistance)**

M\_\_\_\_\_\_\_ F\_\_\_\_\_\_\_\_ Single Head of Household Y\_\_\_\_\_\_\_ N\_\_\_\_\_\_\_\_

Do You consider yourself Hispanic? Yes No

*Race (please circle)*

White Black/African American

Asian American Indian/Alaskan Native

Native Hawaiin/Other Pacific Islander American Indian/Alaskan Native & White

Native Hawaiian/Other Pacific Islander & White Asian & White

Black/African American & White

Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**AGENCY USE ONLY**

Household Size \_\_\_\_\_\_\_

Annual Household Income Category(circle one):

Very Low (30% and lower)

Low(31% to 50%)

Moderate(51% to 80%)

Staff Member \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_