

# NEDCO

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 credit 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)
- One-Time Consultation** (No charge. Offered separately or in conjunction with ABCs of Homebuying)

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 Office** - Eugene/Springfield and other areas: (541) 345-7106 OR Mapleton/Florence: 1-888-345-7106

**Mid-Valley Office** - 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 \_\_\_\_\_

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? \_\_\_\_\_

### Co-applicant

Name \_\_\_\_\_  
 Date of Birth \_\_\_\_\_  
 Social Sec. # \_\_\_\_\_  
 Work Phone \_\_\_\_\_  
 Cell Phone \_\_\_\_\_

### 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 judgments outstanding? Please explain: \_\_\_\_\_

Are you a 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.

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 of Information carefully, and if you wish, please sign below.

## RELEASE OF INFORMATION

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

It is the policy of the 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, you will need to bring with you **copies** of the following items:  
**\* Do not bring original documents; documents 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 proof 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](http://www.nedcocdc.org)

It 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 ensuring 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 number, 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 third parties (such as your creditors), that is, direct us not to make those disclosures.
- If you choose to “opt-out”, we will not be able to answer questions from your creditors.

#### **Release of your information to third parties:**

- So long as you have not opted-out, we may disclose some or all of the information that we collect, as described above, to your creditors or third parties where we have determined that it would further the purpose for which you sought our services, would aid us in counseling you, or is a requirement of grant awards which make our services possible.
- We may also disclose any nonpublic personal information about you, or former participants, 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