CONSUMER CREDIT
COUNSELING SERVICE

Thank you for registering for our upcoming ***Keys to Homeownership Workshop***, designed to guide you through the exciting journey of purchasing your first home. Our workshop is the perfect opportunity for you to gain valuable insights and practical knowledge from industry experts.

Please complete, sign and review the following documents, leaving **ALL dates blank**. Include a copy of your paystub or award letter. If attending as a couple, please fill out each sheet individually.

1. HUD Disclosure
2. Statement of Counseling
3. For Your Protection
4. First Time Homebuyer Workshop Questionnaire

Completed documents can be emailed to the workshop facilitator, Renita Boyd at renita.boyd@fspcares.org.

Consumer Credit Counseling Service is a division of Family Service OF THE PIEDMONT

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HUD DISCLOSURE STATEMENT

Consumer Credit Counseling Service (CCCS) is dedicated to delivering professional consumer credit education, confidential counseling, and debt reduction programs to all segments of the community regardless of the ability to pay. Unmanageable debt not only threatens the economic stability of a family, but also the economic vitality of the surrounding community. A family with uncontrollable debt cannot plan for retirement, send children to college, protect against the economic effects of a catastrophic illness, or buy a home.

CCCS provides a confidential and disciplined program of counseling and consumer education that supports them in their efforts to regain stability. CCCS complies with best practice standards as set forth by the Council on Accreditation (COA) and the National Foundation for Credit Counseling (NFCC) and counselor certification manuals. Additionally, CCCS examines other evidence to assist with best service approaches and modalities and examines outcomes by program, customer satisfaction surveys and community collaborative contracts and feedback.

Clients are not obligated to receive, purchase or utilize any other services offered by Family Service of the Piedmont, or its exclusive partners, in order to receive housing counseling services.

Housing counseling services provided by our agency include:

- **Financial Management/Budget Counseling** – Nationally certified counselors provide free professional advice on money management, maintenance of credit reports, and using credit wisely.

- **Mortgage Delinquency and Default Resolution Counseling** – help owners who are past due with their mortgage and determine options available to avoid foreclosure.

- **Pre-purchase Counseling** – service assisting in developing a personalized plan that explores options and resources to achieve homeownership.

- **Rental Housing Counseling** – service to assist individuals who are looking for rent by creating a budget and action plan so that they have a better idea on what is affordable.

- **Services for Homeless Counseling** – service to assist clients with emergency shelter, transitional housing and other referrals for programs within our community.

- **Pre-Purchase Homebuyer Workshops** – workshop which addresses the important aspects of the home buying process such as lending and home inspections.

- **Reverse Mortgage Counseling** – service to homeowners 62 years of age and older providing information on benefits, costs, and responsibilities of using this resource to access equity in their home.

PRIVACY POLICY

Our agency is committed to assuring the privacy of individuals and/or families who have contacted us for assistance. We realize that the concerns you bring to us are highly personal in nature. We assure you that all information shared both orally and in writing will be managed within legal and ethical considerations. This data may be used:

1. To assist us in our work with you, our staff may seek supervision/consultation with professional colleagues within the agency and, where appropriate and necessary, with other resources in the community.

2. For the purpose of evaluating our services, gathering valuable research information and designing future programs, we may use aggregated case file information. Your anonymity will be maintained through the use of your client number or by using aggregate data in all circumstances.

3. For counseling only clients, we will confirm with your creditors if asked: (a) Verification of appointment (b) Date of counseling (c) Disposition, and

4. For clients needing our intervention on your behalf through a Debt Management Plan, we will disclose the following to your creditors: Your address and home phone number if published; Total debt information; Income, net and gross; Living expenses; A list of your creditors; Personal information concerning your financial circumstances, but not lifestyle or personal habits; Place of employment will be verified only.

In all other situations, your information may be released to appropriate individuals or agencies **ONLY UPON YOUR WRITTEN REQUEST OR when our staff has been served by a valid subpoena**.

PRIVACY PRACTICES

The following detail circumstances under which we will release your information to a third party:

- We may compile data and aggregate information that you give to us, but this information may not be disclosed in a manner that would personally identify you in any way;

- We do not disclose any nonpublic personal information about our customers or former customers to anyone, except as permitted by law;

- We may disclose some or all of the information that we collect, as described below, to creditors, or third parties that you have authorized who need this information in order for us to assist you after a counseling session;

- We may disclose all of the information that we collect, as described below, to creditors and related financial institutions who need this information in order to put you on a Debt Management Plan (DMP);

- 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; and

- We collect nonpublic personal information about you from the following sources:
  - Information we received from you on our applications or other forms you provide;
  - Information about your transactions with us, your creditors, or others; and
  - Information we receive from a credit reporting agency.

We may disclose the following kinds of nonpublic personal information about you:

- Information we receive from you 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.

A copy of this disclosure statement is inserted into each client's file upon initial contact.

I have read and understand the disclosures made above.

_____

Housing Counselor **Date**

_____

Client Signature **Date**

_____

Client Name (Please Print) **Date**

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Statement of Counseling Services

Please read the following statements carefully so that you will understand the procedures for the counseling session. Initial the line next to each statement to indicate your understanding of that provision.
For simplification, the singular is used, even when the plural may apply.

____ I understand the agency will provide a comprehensive personal money management interview.

____ I understand that a certified consumer credit counselor or qualified professional counselor will conduct the interview. A certified consumer credit counselor will review all recommendations, not made by a certified consumer credit counselor.

____ I understand that in the event, I am dissatisfied, I can utilize the Complaint Resolution Process.

____ I hold the agency, its employees, agents and volunteers harmless from any claim, suit, action or demand of my creditors, myself or any other person resulting from advice or counseling.

____ I will be given a written assessment outlining a suggested client action plan, which will be based on the following options:

- I will handle any financial concerns on my own.
- I may choose to enroll in the agency's Debt Management Plan (DMP). Under the DMP, the agency serves as a neutral third party in negotiating with creditors to liquidate financial obligations.
- While the agency seeks to negotiate repayment terms advantageous to my credit rating, the agency has no responsibility or obligation for any past, present, or future credit rating I receive. In certain circumstances, a Debt Management Plan may affect my credit rating negatively. In the event that the counselor suggests a Debt Management Plan, I will receive complete details of the operations, requirements, and responsibilities.
- A counselor may answer questions about bankruptcy, but not give legal advice. If I want legal advice, I will be referred for appropriate assistance. While an attorney can make a recommendation to file bankruptcy, it is a personal choice based on individual circumstances. I will inform the agency of the decision, if I file bankruptcy.
- I will be referred to the other services of the organization or another agency or agencies, as appropriate that may be able to assist with particular problems that have been identified.

____ At some time in the future, a neutral third party may contact me to request a confidential evaluation of the agency's services.

____ Receipt of financial counseling services does not automatically guarantee participation in a Debt Management Plan.

Notice to Clients Who Might Desire a Debt Management Plan: Most of our funding comes from voluntary contributions from creditors who participate in Debt Management Plan (DMP). Since creditors have a financial interest in getting paid, most are willing to make a contribution to help fund our agency. These contributions are usually calculated as a percentage of payments you make through your DMP—up to fifteen percent (15%) of each payment received. However, your accounts with your creditors will always be credited with 100% of the amount you pay through us and we will work with all your creditors, regardless of whether they contribute to our agency.

_____	_____
Applicant	**Counselor**
_____	_____
Applicant	**Date**

Statement of Counseling Services

CLIENT BILL OF RIGHTS

We pledge that our clients have the right:

- To prompt counseling services for managing money based on their financial situation;
- To treatment with dignity and respect;
- To be actively involved in a comprehensive assessment of their financial situation including and appropriate action plan;
- To express dissatisfaction through a Complaint Resolution Process;
- To discontinue their relationship with our agency at any time; and
- To ask questions and to have concerns addressed.

COMPLAINT RESOLUTION PROCESS

We are committed to providing you with high quality professional services. However, if you are not satisfied with the services provided or if you want to make a complaint, please follow the guidelines below.

Step One: Try to resolve the issue with the staff member involved giving him or her specific information about your complaint.

Step Two: If step one is not possible or the issue is not resolved to your satisfaction, write Director, Consumer Credit Counseling Service, 315 East Washington Street, Greensboro, NC 27401.

Step Three: The Director of Consumer Credit Counseling Service may request a meeting with you (phone or in-person) or seek more information from a staff person. The agency will respond within 15 days.

Step Four: If your issue is still unresolved, you may appeal in writing directly to Family Service of the Piedmont by writing Chief Executive Officer, Family Service of the Piedmont, 902 Bonner Drive, Jamestown, NC 27282. After additional fact finding a concluding decision will be provided to you within 15 days.

NON-DISCRIMINATION POLICY

Our agency serves all members of the community. We do not engage in the practices of discrimination in the selection and participation of clients in our programs or services with the respect to age, race, religion, color, gender, sexual preference, national origin, or disability.

CONSUMER CREDIT
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PARTICIPANT PROFILE

HOW DID YOU HEAR ABOUT THIS PROGRAM?_____
_____

FIRST NAME: _____ **LAST NAME**: _____

ADDRESS: _____
CITY: _____ **STATE:** _____ **ZIP:** _____ **COUNTY:** _____

TELEPHONE: (_____) _____ - _____
EMAIL: _____

DO YOU:
_____RENT (Subsidized? _____YES _____NO) OWN _____ LIVE WITH OTHERS _____
PER MONTH $_____

TYPE OF SHELTER:
_____MOBLE HOME _____HOUSE _____APARMENT

HOW LONG HAVE YOU LIVED THERE? _____YEARS _____MONTHS

ARE YOU HEAD OF YOUR HOUSEHOLD? _____YES _____NO

MARITAL STATUS: _____Single _____Married _____Widowed _____Divorced _____Separated

GENDER: _____Man _____Woman _____Other _____

ETHNICITY:

_____ Hispanic/Latino _____African-American/Black _____Caucasian/White
_____ Asian _____ Hawaiian/Pacific Islander _____Middle Eastern/North African

_____ Other:_____

WHAT IS YOUR HIGHEST LEVEL OF EDUCATION?

_____Grade School _____High School _____GED _____College _____Post College

EMPLOYMENT STATUS: _____Full-Time _____ Part-Time _____# of Hours Per Week
_____Student _____Retired _____Disabled _____Unemployed but Seeking Employment

ANNUAL YEARLY INCOME: _____Under $10,000 _____$10,000-$19,999 _____$20,000-$29,999

_____$30,000-$39,999 _____$40,000-$49,999 _____$50,000-$59,999 _____$$60,000+

FINANCIAL PRODUCTS YOU HAVE (please check all that apply): _____Checking Account

_____Savings Account _____Certificate of Deposit _____Stocks, Bonds, Mutual Funds

_____Personal Loan (car, boat, etc.) _____Mortgage Loan _____No Accounts

INCLUDING YOURSELF HOW MANY LIVE IN YOUR HOUSEHOLD? _____ Ages: _____

WHO ELSE WORKS IN YOUR HOME?

_____Spouse/Significant Other _____Parent/Guardian _____Child _____Other:_____

WHAT IS THEIR INCOME: Per Hour:_____ or Per Month: _____ or Per Year: _____

DO THEY WORK: _____Full Time _____Part Time _____Hours Per Week

Thank you for providing this personal information. It will be kept confidential and used only to assist in obtaining funding, so we may continue to provide services.

FOR PROGRAM USE ONLY

Partner: Consumer Credit Counseling Service

Course: Keys to Homeownership Date: _____

Trainer: Renita Boyd Method: _____Classroom _____Virtual

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CAUTION—Your Action is Required Soon

U.S. Department of Housing
and Urban Development
Federal Housing Administration (FHA)

OMB Approval No: 2502-0538
(exp. 06/30/2021)

For Your Protection:
Get a Home Inspection

You must make a choice on getting a Home Inspection. It is not done automatically.

You have the right to examine carefully your potential new home with a professional home inspector. But a home inspection is not required by law, and will occur only if you ask for one and make the arrangements. You may schedule the inspection for before or after signing your contract. You may be able to negotiate with the seller to make the contract contingent on the results of the inspection. For this reason, it is usually in your best interest to conduct your home inspection as soon as possible if you want one. In a home inspection, a professional home inspector takes an in-depth, unbiased look at your potential new home to:

- ✓ **Evaluate the physical condition: structure, construction, and mechanical systems;**
- ✓ **Identify items that need to be repaired and**
- ✓ **Estimate the remaining useful life of the major systems, equipment, structure, and finishes.**

The Appraisal is NOT a Home Inspection and does not replace an inspection.

An appraisal estimates the market value of the home to protect the lender. An appraisal does not examine or evaluate the condition of the home to protect the homebuyer. An appraisal only makes sure that that the home meets FHA and/or your lender's minimum property standards. A home inspection provides much more detail.

FHA and Lenders may not Guarantee the Condition of your Potential New Home

If you find problems with your new home after closing, neither FHA nor your lender may give or lend you money for repairs. Additionally, neither FHA nor your lender may buy the home back from you. Ask a qualified home inspector to inspect your potential new home and give you the information you need to make a wise decision.

Your Home Inspector may test for Radon, Health/Safety, and Energy Efficiency

EPA, HUD and DOE recommend that houses be tested and inspected for radon, health and safety, and energy efficiency, respectively. Specific tests are available to you. You may ask about tests with your home inspector, in addition to the structural and mechanical systems inspection. For more information: Radon -- call 1-800-SOS-Radon; Health and Safety – see the HUD Healthy Homes Program at www.HUD.gov; Energy Efficiency -- see the DOE EnergyStar Program at www.energystar.gov.

Selecting a Trained Professional Home Inspector

Seek referrals from friends, neighbors, other buyers, realtors, as well as local listings from licensing authorities and local advertisements. In addition, consult the American Society of Home Inspectors (ASHI) on the web at: www.ashi.org or by telephone at: 1-800-743-2744.

I / We (circle one) **have read this document and understand that if I/we wish to get a home inspection, it is best do so as soon as possible. The appraisal is not a home inspection. I/we will make a voluntary choice whether to get a home inspection. A home inspection will be done only if I/we ask for one and schedule it. Your lender may not perform a home inspection and neither FHA nor your lender may guarantee the condition of the home. Health and safety tests can be included in the home inspection if I/we choose.**

_____	___/___/____	_____	___/___/_____
(Signed) Homebuyer	**Date**	**(Signed) Homebuyer**	**Date**

Public reporting burden for this collection is estimated at an average of 30 minutes to review the instructions, find the information, and complete this form. This agency cannot conduct or sponsor a collection of information unless a valid OMB number is displayed. You are not required to respond to a collection of information if this number is not displayed. Valid OMB numbers can be located on the OMB Internet page at http://www.whitehouse.gov/library/omb/OMBINVC.html - HUD If desired you can call 1-800-827-1000 to get information on where to send comments or suggestions about this form.

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First Time Homebuyer Workshop
Questionnaire

Name:_____ Date:_____

# of people in your household: _____

Ethnicity:

_____ Hispanic/Latino _____African-American/Black _____Caucasian/White

_____ Asian _____ Hawaiian/Pacific Islander _____Middle Eastern /North African

_____ Other:_____

Do you live in a Rural Area? _____Yes _____No

What is your City and County of Residence?

City:_____ County:_____

Annual Gross Income:_____

Please attach proof of income with this form (paycheck stub, social security award letter, disability letter, etc.). Completed documents can be emailed to the workshop facilitator, Renita Boyd at renita.boyd@fspcares.org.

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