

Employment Information <i>(for the last 2 years)</i>			
Employer Name:		Telephone:	
Job Title:		Hire Date:	
Street Address:			
City:		State:	Zip:
I work:	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	I get paid:	<input type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-weekly <input type="checkbox"/> Twice a month <input type="checkbox"/> Once a month
Gross Income (before taxes) per Pay Period:		Annual Gross Income:	

Employer Name:		Telephone:	
Job Title:		Hire Date:	
Street Address:			
City:		State:	Zip:
I work:	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	I get paid:	<input type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-weekly <input type="checkbox"/> Twice a month <input type="checkbox"/> Once a month
Gross Income (before taxes) per Pay Period:		Annual Gross Income:	

AUTHORIZATION

My signature below certifies that all information provided on this application is accurate and complete to the best of my knowledge. I understand that it is unlawful to present false information and that doing so may result in termination from the program and civil and/or criminal legal action.

Applicant Signature: _____ Date: _____

FINANCIAL INFORMATION

Applicant Name: _____

Monthly Income

	Gross	Net	Verification
Borrower Monthly Income, Employer Paystub(1)	\$	\$	
Borrower Monthly Income, Employer Paystub(2)	\$	\$	
Co-Borrower Monthly Income, Employer Paystub(1)	\$	\$	
Co-Borrower Monthly Income, Employer Paystub(2)	\$	\$	
Borrower Income – Self Employment P&L	\$	\$	
Co-Borrower Income – Self employment P&L	\$	\$	
Social Security /SSI / SSDI	\$	\$	
Child or Spousal Support	\$	\$	
Unemployment Compensation	\$	\$	
Workers Disability Compensation	\$	\$	
Veterans Benefits	\$	\$	
Retirement Benefits	\$	\$	
Income From Rental properties (counts 75%)	\$	\$	
Non-borrower Spouse & other household members	\$	\$	
Room sublease/family member (if only can prove payments)	\$	\$	
Child care assistance	\$	\$	
Housing assistance	\$	\$	
Food Stamps	\$	\$	
Other	\$	\$	
Other	\$	\$	
TOTAL HOUSEHOLD INCOME	\$	\$	

Servicing DC, MD and VA

HUD ID #80375 UWNCA #8027 CFC #22317
12320 Parklawn Dr. Rockville, MD 20852
8280 Willow Oaks Corporate Dr. Ste. 600. Fairfax, VA 22031
1200 G St. N.W. Ste. 800. Washington, DC 20005

Phone: 301-760-7636/703-291-6324/202-558-2260; Fax: 301-761-1608; Email: Counseling@aa-hc.org; Website: www.aa-hc.org

Revised 02.23.2015

Monthly Expenses

Housing (New Mortgage)		Education	
Mortgage 1 st (P&I & PMI) Primary	_____	Tuition	_____
Mortgage 2 nd Primary	_____	Books, papers and supplies*	_____
Property Tax	_____	Newspapers and magazines*	_____
Homeowners Insurance (HOI)	_____	Lessons (sports, dance, music)*	_____
Trash service or Condo or HOA fees	_____		
Mortgage 1 st (P&I & PMI) Rental	_____	Gifts	
Mortgage 2 nd Rental	_____	Birthdays*	_____
Property Tax	_____	Major holidays*	_____
Homeowners Insurance (HOI)	_____		
Trash Service or Condo or HOA Fees	_____	Personal	
Home Maintenance and Furnishings	_____	Barber or beauty shop*	_____
Lawn service	_____	Toiletries*	_____
Transportation		Children's allowances	_____
Gas*	_____	Tobacco products*	_____
Car payment/s	_____	Beer, wine or liquor*	_____
Car insurance	_____		
Car inspection*	_____	Entertainment	
Car repairs and maintenance*	_____	Telephones (land-lines and cell phones)	_____
License plates and registration fees	_____	Cable / Satellite TV / Internet services	_____
Public transportation or taxi*	_____	Fitness or Social Clubs	_____
Parking and tolls*	_____	Movies, Video, sporting events, concerts, etc	_____
Utilities		Vacations/trips	_____
Electricity	_____	Donations	
Heating (Gas and Oil)	_____	Churches & Charities	_____
Water / Sewage	_____		
Food		Miscellaneous	
Groceries	_____	Checking account fees, money order fees, etc.	_____
School Lunches	_____	Pet care and supplies*	_____
Work-related (Lunches and snacks)	_____	Postage*	_____
Restaurant and take-out meals	_____	Pictures and photo processing*	_____
Insurance		"Mad" money	_____
Health (medical & dental, if not payroll deducted)	_____	Debts	
Life	_____	Student loan	_____
Long-Term Care & Disability Insurance	_____	Credit card (monthly minimum)	_____
Medical		Credit card (monthly minimum)	_____
Doctor (out of pocket costs) & co-pays	_____	Credit card (monthly minimum)	_____
Dentist (out of pocket costs)	_____	Subtract other expenses in credit card bills (*)	_____
Prescriptions (out of pocket costs)	_____		
Childcare		Other	
Childcare or babysitters	_____	Personal loan/s	_____
Child support or alimony	_____	Other medical bills	_____
Clothing		Other	_____
Clothing	_____	Other	_____
Laundry and dry cleaning	_____		
Total Regular Monthly Expenses \$ _____			

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Household Assets		
Description	Value / Amount	Amount Owed
Auto #1 Model/Year:		
Auto #2 Model/Year:		
Auto #3 Model/Year:		
Cash on Hand Over \$100		
Checking Account #1		
Checking Account #2		
Savings #1		
Savings #2		
Money Market Funds		
IRA / Keogh Accounts		
Stocks/Bonds/CDs/Annuities, etc		
Anticipated Tax Refunds		
Boats / Jet Skis		
RV/ Recreational Homes		
Motorcycles / Snowmobile		
Farm Equipment		
Trailers		
Other Property		
Other:		

HOUSEHOLD ASSETS:

As head of Household I declare that members of my household have no ownership, in full or part, of any assets other than those identified above, the value of which have been disclosed.

My signature below certifies that all information provided on this application is accurate and complete to the best of my knowledge.

Applicant Signature

Date

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PERSONAL FINANCE COUNSELING CLIENT SERVICES AGREEMENT/AUTHORIZATION/DISCLOSURE

Asian-American Homeownership Counseling, Inc. (AAHC) is pleased to offer our services to help resolve your current finance/housing issues. Through the Personal Finance Counseling; credit and asset building, budgeting, and Pre-& Post-purchase, we will provide you with assistance and advise that typically includes:

- Gathering information from you to learn about your current finance issue, including obtaining demographic information, reason for financial difficulty and situation, housing objective, credit status, home value and loan documentation;
- Assessing your situation and financial capacity to meet your monthly obligations;
- Determining the realistic options available to you;
- Developing and executing an agreed to action plan to meet your financial goals;
- Providing the utmost confidentiality, honesty and professionalism in all our dealings.

Please understand that Asian-American Homeownership Counseling, Inc. has no authority or jurisdiction over the lender/servicer/other creditors. AAHC does not delay, prevent, or stop any collection or foreclosure action that is pending against your loan. It is solely at the discretion of the lender/servicer/creditors whether they wish to help resolve your issues.

AAHC staff and volunteers do not give legal advice or provide legal services. AAHC staff may refer you to other agencies for legal assistance but you are not obligated to use any services offered.

By signing this documents you:

- Acknowledge that you have received AAHC's Privacy Policy, Referral Disclosure and other disclosures;
- Acknowledge that in consideration for receiving services from AAHC, you agree to hold AAHC and its staff, including its volunteers, free and harmless from any claims, damages, liabilities or injuries arising from these services;
- Acknowledge that you understand AAHC receives Federal funds through the National Foreclosure Mitigation Counseling (NFMC); Department of Housing and Urban Development (HUD); State, County and Local Government Entities; Foundations; Nonprofits; and Individual donors and are required to share some of your personal information with their program administrators or their agents for the purpose of program monitoring and compliance. You also acknowledge that your personal information to be submitted to the data collection system for grantors to conduct follow-up with you related to program evaluation.
- Authorize AAHC to pull credit reports to evaluate my credit for finance/housing counseling purpose.
- Acknowledge and understand that AAHC staff and volunteers may answer your questions and refer you to an appropriate entity for further assistance.
- Acknowledge that you have reviewed and understand this agreement/authorization form in its entirety;
- Will always provide honest and complete information to my/our counselor;
- Will be on time for appointments and understand that if we are late for an appointment the appointment will still end at the scheduled time; and
- Will provide all necessary documentation and follow-up information in a timely manner.

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Non-discrimination Policy

This organization does not and shall not discriminate on the basis of race, creed, color, religion, gender, age, national origin, physical or mental health, sexual orientation or any characteristic protected by law, and is in compliance with all requirements of law and regulations with respect to the provision of services, employment decisions and volunteer participation

Referral Service DISCLOSURE

As a client of AAHC, you have the option of utilizing the services of the licensed real estate brokers, lenders, attorneys and other service experts on our reference lists, however, **you are under no obligation to utilize these individuals.**

AAHC does from time to time receive grants or donations from various institutions in order to provide free services to the public. However, AAHC does not endorse or recommend any particular institutions. AAHC provides a list of servicers for the sole purpose of informing clients and providing a starting point for clients that may need it.

Acknowledgment

I/We understand that Asian-American Homeownership Counseling, Inc. provides information and education on numerous loan products and housing programs and I further understand that the finance/housing counseling I receive from Asian-American Homeownership Counseling, Inc. in no way obligates me to choose any of these particular loan products or housing programs.

Signature/s: _____ / _____ Date: _____

Print Name/s: _____ / _____

Current address: _____

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PRIVACY AND DISCLOSURE POLICY

(Page 1 of 2)

We at the Asian-American Homeownership Counseling, Inc. (AAHC) value your trust and are committed to the responsible management, use and protection of personal information. This notice describes our policy regarding the collection and disclosure of personal information. Personal information, as used in this notice, means information that identifies an individual personally and is not otherwise publicly available information. It includes personal financial information such as credit history, income, employment history, financial assets, bank account information and financial debts. It also includes your social security number and other information that you have provided us on any applications or forms that you have completed.

Information We Collect

We collect personal information to support our finance/housing counseling program and to aid you in shopping for and obtaining a home mortgage from a conventional lender. We collect personal information about you from the following sources:

- Information that we receive from you on applications or other forms,
- Information about your transactions with us, our affiliates or others,
- Information we receive from a consumer reporting agency, and
- Information that we receive from personal and employment references.

Information We Disclose

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

- Information we receive from you on applications or other forms, such as your name, address, social security number, employer, occupation, assets, debts and income;
- Information about your transactions with us, our affiliates or others, such as your account balance, payment history and parties to your transactions; and
- Information we receive from a consumer reporting agency, such as your credit bureau reports, your credit history and your creditworthiness.

To Whom Do We Disclose

We may disclose your personal information to the following types of unaffiliated third parties:

- Financial service providers, such as companies engaged in providing home mortgage or home equity loans,
- Licensed Real Estate Agents for sales of property
- Attorneys for other related legal services
- Other housing related agencies: nonprofit; local, state and federal agencies; or property managements
- Others, such as nonprofit organizations involved in community development, but only for program review, auditing, research and oversight purposes.

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We may also disclose personal information about you to third parties as permitted by law.

Prior to sharing personal information with unaffiliated third parties, except as described in this policy, we will give you an opportunity to direct that such information not be disclosed.

Confidentiality and Security

We restrict access to personal information about you to those of our employees who need to know that information to provide products and services to you and to help them do their jobs, including underwriting and servicing of loans, making loan decisions, aiding you in obtaining loans from others, and financial counseling. We maintain physical and electronic security procedures to safeguard the confidentiality and integrity of personal information in our possession and to guard against unauthorized access. We use locked files cabinets in locked room during nonworking hours to protect your information. Our safeguards comply with federal regulations to guard your personal information.

PRIVACY CHOICES FORM

If you want to opt out, that is direct us not to make disclosures about your personal information (other than disclosures permitted by law or by counseling agreement) as described in this notice, check the box below to indicate your privacy choices. This authorization is effective immediately.

- Limit disclosure of personal information about me to unaffiliated third parties except nonprofit organizations involved in my case or government entities that required my information.

Primary Name: _____ Signature: _____

Secondary Name: _____ Signature: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: (____) _____ - _____

Date: _____

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CLIENT CREDIT REPORT AUTHORIZATION FORM

I hereby authorize and instruct *Asian-American Homeownership Counseling, Inc.* (hereinafter “AAHC”) to obtain and review my credit report. My credit report will be obtained from a credit reporting agency chosen by AAHC. I understand and agree that AAHC intends to use the credit report for the purpose to evaluating my financial readiness to purchase a home, refinance an existing loan and/or to engage in pre- & post-purchase counseling activities.

My signature below also authorizes the release to credit reporting agencies of financial or other information that I have supplied to AAHC in connection with such evaluation. Authorization is further granted to the credit reporting agency to use a copy of this form to obtain any information the credit reporting agency deems necessary to complete my credit report.

In addition, in connection with determining my ability to obtain a loan, I

____ authorize

____ do not authorize

AAHC to share potential mortgage lender and/or counseling agencies my credit report and any information that I have provided, including any computations and assessments that have been produced based upon such information. These lenders may contact me to discuss loans for which I may be eligible, and these counseling agencies may contact me to discuss counseling services.

I understand that I may revoke my consent to these disclosures by notifying AAHC in writing.

Client’s Name (Print)

Client’s Signature

Date

Social Security Number

Date of Birth

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