

MID-OHIO REGIONAL PLANNING COMMISSION HOMEOWNERSHIP FORECLOSURE PREVENTION INTAKE FORM

APPLICANT (HOUSEHOLD HEAD)

CO-APPLICANT/SPOUSE

Full Name _____

Full Name _____

Address _____

Address _____

E-mail Address _____

E-mail Address _____

Home Phone _____

Home Phone _____

Marital Status _____

Marital Status _____

Birthdate _____

Birthdate _____

Social Security Number _____

Social Security Number _____

Female Head of Household? **YES/NO**

Are you a Veteran? **YES/NO**

Place of Employment _____

Place of Employment _____

Address _____

Address _____

Phone _____

Phone _____

Gross income per month _____

Gross income per month _____

How did you hear about our program? _____

FOR REPORTING PURPOSES ONLY (The following information is voluntary and will not affect the process of your application)

Please check one of the following for Race/Ethnicity:

Race:

- _____ Black
- _____ White
- _____ Asian or Pacific Islander

- _____ American Indian
- _____ Eskimo or Aleut
- _____ Other _____

Ethnicity:

- _____ Hispanic
- _____ Non-Hispanic

INCOME SOURCES (employment, child support, alimony, part-time employment, disability, etc.)

Source

Gross Monthly Income

HOUSEHOLD/FAMILY SIZE

Number in household/family _____ Disabled Residents _____

MORTGAGE INFORMATION

How long have you owned your home? _____ Loan Type: FHA VA Conventional
Lender _____ Loan Number _____
Payment Amount _____ Interest Rate _____ Do you have an ARM or FIXED Rate? _____
2nd Mortgage _____ Loan Number _____
Interest Rate _____ Do you have an ARM or FIXED Rate? _____ Payment Amount _____
Reason for Delinquency: _____ # of payments missed: _____

PRIVACY POLICY/ DISCLOSURE

I certify that I have examined the information contained within this form and that it is true and complete to the best of my knowledge. I understand the following by signing below:

I authorize this agency or its representatives to inspect and evaluate actual services provided to me.

I am not obligated to receive any service offered by MORPC or its partner agencies such as: homebuyer workshops, homebuyer counseling, foreclosure workshops, foreclosure counseling, maintenance workshops or any other service MORPC offers outside of the Housing and Community Services Department.

While affordable homes, lending products and other forms of assistance might be available, I am under no obligation to buy the homes held by, offered by or owned by the agency or the local jurisdiction. Refer to www.comehomeco.org for a list of affordable housing units.

I have the right to use any loan products other than those offered by MORPC or its partners and purchase or rent properties other than those MORPC owns or holds interest in.

I understand that no information obtained through this form shall be made public in such a manner that the dwelling or occupants can be identified, except where otherwise required by law. All information shared both orally and in writing will be managed within legal and ethical considerations. Your "nonpublic personal information," such as your total debt information, income, living expenses and personal information concerning your financial circumstances, will be provided to creditors and program funders.

I understand I am giving permission to The Mid-Ohio Regional Planning Commission to access my credit report file. The information obtained from my credit report will be used solely for the homeownership program and will not be forwarded or shared with any person or organization.

I understand my file will be closed if there is no activity for six months.

I understand I may opt out of certain disclosures of nonpublic personal information to third parties (such as creditors) and can direct MORPC to not make those disclosures. If I choose to opt out, MORPC will not be able to answer questions from my creditor. If at any time I wish to change my decision with regard to opting out, I will submit my request in writing to MORPC at the address show below.

I understand that I may be held civilly and/or criminally liable under Federal and State law for any knowingly false or fraudulent statements.

APPLICANT

CO-APPLICANT

DATE

DATE

Please return this form to the Mid-Ohio Regional Planning Commission, Attn: Homeownership Program 111 Liberty Street, Suite 100, Columbus, Ohio 43215

Funding for these services is provided by Franklin County, the Ohio Housing Finance Agency and the U.S. Department of Housing and Urban Development.