

Good Neighbors Community Outreach Agency 3356 Seymour Avenue • Bronx, NY 10469 Tel: 718-652-3288 • Fax: 718-944-4183

HOMEOWNER SERVICES

Personal Profile **CLIENT INFORMATION** PLEASE PRINT First Name Last Name _____ **Street Address** City Zip Code Current Housing Arrangement (circle one) Homeowner w/mortgage Homeowner w/o mortgage Other Renter **Home Phone** Work Phone Mobile Phone Email Gender (circle one) Head of Household (circle one) Μ F Yes No Race (circle one) Asian Black/Non-Hispanic Choose Not to Respond Hispanic White/Non-Hispanic Other Number in Household # of Children age 17 and younger Foreign Born (circle one) Yes Veteran (circle one) No Yes No Birthdate (mm/dd/yyyy) Age Education (circle one) College High School/GED None Primary Vocational Marital Status (circle one) Choose Not to Respond Married Single Separated Widowed Household Annual Income \$ Active Military (circle one) Yes No **Referral Source** FOR INTERNAL USE ONLY Check Number _____ **Check Amount**

Counselor Name

Intake Date



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HOMEOWNER SERVICES (continued)

APPLICANT EMPLOYMENT

Primary Employer					
Date Start		Date End (if app	licable)		
Title					
Business Type		Self Employed (circle one)	Yes	No
Monthly Gross Income \$		Monthly Net Inc	come	\$	
CO-APPLICANT INFORMATION					
First Name		Last Name			
Street Address		_			
City		Zip Code			
Home Phone		Work Phone			
Mobile Phone		Email			
CO-APPLICANT EMPLOYMENT					
Primary Employer					
Date Start		Date End (If app	olicable)		
Title					
Business Type		Self Employed (circle one)	Yes	No
Monthly Gross Income \$		Monthly Net Inc	come	\$	
PROPERTY INFORMATION					
Title to property in name (s) of:					
Block /Lot		Number of Unit	s		
Purchase price \$		Year of purchase	e		
Original Mortgage \$	Balance	\$	Mont	hly Payment \$	
Lender					
Second Original Mortgage (if applicab Original Mortgage \$	-	Balance \$	Mo	nthly Payment \$	
Lender					
Homeowner's Insurance Carrier					
Limits of Coverage					
Property Description (circle one)	Brick	Brownstone	Fram		
	51101	Diottilistofic			



HOMEOWNER SERVICES (continued)

INCOME					
		<u>Monthly (\$)</u>	Yearl	<u>v (\$)</u>	
Pension		\$	\$		
Social Security		\$ \$	\$		
Retirement		\$	\$		
Other		\$	\$		
Gross Income from Subje	ect Real Estate	\$	\$		
TOTAL		\$	\$		
SUMMARY of ASSETS					
Cash Accounts			\$		
Other real estate owned	(give market value)		\$		
				- -	
TOTAL			\$	•	
PRESENT MONTHLY FIXED CHA	RGES				
Federal Taxes	\$		State Taxes	\$	
Local Income Taxes	\$		Social Security	\$	
Premium for Life Insuran	ce <u>\$</u>				
Other (Explain)	\$				
TOTAL		\$	<u> </u>		
MONTHLY FAMILY EXPENSES					
Medical/Dental/Pharmacy/Clot	hing/ Telephone/Auto I	Insurance/ Educatio	in	\$	
Daily expenses at work/ Children allowance/ Food \$					
Transportation (gas, public transportation, car repair, etc)					
Other <i>(explain)</i> \$			\$		
			TOTAL	\$	
MONTHLY HOUSING EXPENSES					
Utilities (Heat, hot water, gas, e	electric, other)			\$	
LIABILITIES					
NAME	ORIGINAL AMOUNT	ACCOUNT #	BALANCES	MONTHLY PAYMEN	Т
					•
		ļ			
TOTALS:					



HOMEOWNER SERVICES (continued)

ADDITIONAL EXPENSES			
Are you making Alimony or If yes, <u>\$</u>	Child Support Payments? (per	circle one)	Yes No
APPLICANT BANKING INFO	RMATION		
Name of Bank	Account #	Balance	Type of Account
Co-APPLICANT BANKING IN	FORMATION		
Name of Bank	Account #	Balance	Type of Account
CREDIT and LEGAL			
Are you presently or have B If so, please detail, specify	ankruptcy Judge		lease circle) Liens on Property
Authorization			
This application is made fo	r the purpose of obtaining btain any information need	credit and I authorize you to ed concerning the statemer	purpose of obtaining credit. o communicate with any person, firm or nts made in this application and agree that the
	,	0	
Applicant Signature		Date	
Applicant Social Security N Co-Applicant Signature	umber	Date	



HOMEOWNER SERVICES (continued)

PRIVACY POLICY and PRACTICES

Neighborhood Housing Services of New York City, Inc. and its subsidiaries are 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. 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, program managers, and others only with your authorization and signature. 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 that we gather about you:

1. Information we receive from you orally, on applications or other forms, such as your name, address, social security number, assets and income;

2. 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

3. Information we receive from a credit reporting agency, such as your credit history.

You may opt-out of certain disclosures:

1. 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.

2. If you choose to "opt-out", we will not be able to answer questions from your creditors. If at any time you wish to change your decision with regard to your "opt-out," you may call any of our Neighborhood offices at anytime.

Release of your information to third parties:

1. 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 be helpful to you, would aid us in counseling you, or is a requirement of grant awards which make our services possible.

2. We may also disclose any nonpublic personal information about you to anyone as permitted by law (e.g., if we are compelled by legal process).

3. 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 acknowledge that I have received a copy of **Neighborhood Housing Services of New York City, Inc. and its** subsidiaries Fee Schedule.

Client Signature

Date

GOOD NEIGHBORS COMMUNITY OUTREACH AGENCY FEE SCHEDULE – COUNSELING SERVICES

Credit Report This fee covers the cost of obtaining a credit report.	\$25.00
Credit Analysis (excludes credit report) This fee covers the cost of two 45 minute sessions to discuss the client's credit profile.	\$50.00
E Home This fee covers the cost of participation in an online homeownership education course.	\$50.00
Fast Track This fee covers the cost of participation in an accelerated homeownership education course.	\$150.00
Foreclosure Counseling This includes one-on-one meetings with a counselor to determine affordability, create a budg credit reports, and analyze mortgage default options.	O CHARGE et, review
Homebuyer's Club This fee covers the cost of participation in the Homebuyer's Education Course or Club which is hour sessions or 2-five hour sessions designed to educate first time home buyers in the home process.	
Home Maintenance Training Level 1 This fee covers the cost of home maintenance and repair training courses.	\$175.00
Home Maintenance Training Level 2 This fee covers the cost of advanced home maintenance and repair training courses.	\$175.00
Landlord Training 2-4 units This fee covers the cost of education and training focusing on the rights and responsibilities of in addition to the financial aspects of owning and operating a rental property.	\$100.00 f landlords
Pre Purchase Counseling This fee covers the cost of one-on-one meetings with a counselor to discuss the criteria and pu buying a home including determining affordability, creating a budget, reviewing credit repor learning about pre-closing and post-closing requirements.	
Reverse Mortgage This fee covers the cost of applying for a reverse mortgage.	\$125.00
Good Neighbors offices may establish individual fees for specific programs, subject to approval by Central Services. Payments accepted by check, credit card, or money order ONLY. Effective January 1, 2013	
Effective surfactly 1, 2015	

GOOD NEIGHBORS COMMUNITY OUTREACH AGENCY FEE SCHEDULE – LENDING SERVICES

FEE SCHEDULE – LENDING SERVICES	
LOAN APPLICATION FEES These fees cover the cost of a single or a joint credit report and the processing of an application for an NHS loan produc	t.
1- 4 Family Moderate Emergency Rehab Lending \$50.0	0
1- 4 Family Moderate Rehab Lending / Debt Consolidation \$100.0	0
1- 4 Gut Rehab Mixed Use/Multi-Family; Landlord One \$200.0	0
Closing Cost Assistance Products \$100.0	0
Home First \$100.0	0
LOAN ORIGINATION FEES These fees cover the administrative costs of the process of entering a loan into the NHS loan origination system and preparing that loan for presentation to management or a loan committee for approval.	
1-4 Gut Rehab & Mixed Use/Multi Family; Landlord One 2% loan amou	nt
1-4 Moderate Rehab Govt. Funds 2% total amount to be finance	d
1-4 Moderate Rehab Private Funds 2% total amount to be finance	d
Credit Report (Single) (Equifax or Credco) \$25.0 This fee covers the cost of obtaining a credit report for a single individual. NHS uses the information in a credit report to help decide whether or not an applicant meets the credit eligibility standards of the loan product and the terms of loan approval.	0
Credit Report (Joint) (Equifax or Credco) \$30.0 This fee covers the cost of obtaining a credit report for a couple. NHS uses the information in a credit report to help decide whether or not an applicant meets the credit eligibility standards of the loan product and the terms of loan approval.	
Debt Consolidation 2% debt amt + amount finance	d
Good Faith Binder (refundable after closing) \$250.0 This is a good faith deposit paid up front by the applicant if NHS is required to engage the services of a company which researches the title of a property to determine what entities or persons have ownership or lien interests is the property.	/
HAP 2% NHS loan amou	nt
GAP 2% NHS loan amou	nt
Rehab Fee 1% - 3% of rehab amoun This fee covers the cost of work provided by the NHS construction services department for a rehab loan.	nt
Construction fees may be applicable to specific loan products.	
Good Neighbors offices may establish individual fees for specific programs,	
subject to approval by Central Services. Payments accepted by check, credit card, or money order ONLY.	
Effective January 1, 2013	

SERVICING RELATED FEES

\$50.00 This fee covers the cost of providing a Mortgage Satisfaction when a mortgage loan has been paid in full.
Late Fee 2% / max \$25.00 per month This fee is charged when a monthly loan payment has not been made by the grace period after the due date.
Mortgage Recording Fee \$200.00+ This fee covers the cost of entering an official recording of a mortgage lien.
\$50.00 This fee covers the cost of acquiring a payoff letter describing the amount required to pay off your loan.
Refinance Document Preparation Fee\$250.00This fee covers the cost of preparing documents for refinancing.
Subordination Fee \$250.00 (Minimum) This fee covers the cost of allowing a first lien or interest to be paid off and allowing another first mortgage company to be the first priority lien holder.
UCC1 \$40.00/42.50 This fee covers the cost of filing the UCC1 financing statement.
UCC 3 (Termination) \$50.00 This fee covers the cost of terminating or extending a UCC1.
OTHER LENDING RELATED FEES
Commitment Fee (HAP & GAP) \$100.00 This fee is charged by NHS to the applicant upon issuance of a commitment letter for HAP and GAP loans.
Document Processing Fee \$50.00 This fee covers the cost of preparing and providing requested documents.
Initial Construction Inspection with scope\$400.00This fee covers the cost of the initial construction inspection.\$400.00
Pay out Inspection \$300.00 This fee covers the cost of an inspection by NHS Construction services to advise the percentage of the scope of work completed and the suggested payment to the contractor.
Wiring Fee \$25.00 This fee covers the cost of a wire transfer to the Closing Attorney's account.
Construction fees may be applicable to specific loan products. Good Neighbors offices may establish individual fees for specific programs, subject to approval by Central Services. Payments accepted by check, credit card, or money order ONLY. Effective January 1, 2013