

1611 Genesee Street
Utica, NY 13501
Tel. 315-724-4197
Fax. 315-724-1415
NYS TDD Relay # 800-622-1220
www.thehomeownershipcenter.org

Dear Customer,

Thank you for inquiring about our emergency home repair/home improvement loan programs.

We provide an overview of our home improvement programs during our Post-Purchase class, which is a requirement for anyone applying for any kind of home repair/improvement product or program. If you fail to complete this class, no further progress will be made with your application, regardless of your eligibility for the product.

Included in this application packet you will find:

- Program Application
- Document Checklist
- Post-Purchase Class Description, Course Schedule and Class Registration Form

The Post-Purchase Class is an eight-hour course and is FREE. During the course we will review the process for receiving our home improvement products, review all paperwork and loan documents and answer any questions you may have in addition to discussing personal finance, credit and home maintenance.

In order to file an application for home repair/improvement programs, please return the following:

- **Completed Post-Purchase Registration form**
- **Completed Program Application**
- **All documents on the checklist**
- **A \$25 CHECK or MONEY ORDER for the Application Fee made out to The HomeOwnership Center (Note: We do NOT accept cash)**

Remember, your class registration form AND Completed Intake Form must be received in order to attend – we do not accept walk-ins. Classes fill up quickly, which means you may want to put down your first AND second choice. If you have any questions, please feel free to call our office at (315) 724-4197.

Sincerely,



Julie Jalowiec
HomeOwnership Coordinator

| APPLICANT | | | | CO-APPLICANT | | |
|--|----------------|--|--|---|--------------------------------|-----------------------|
| Primary Applicant Name | | Date of Birth | | Co-Applicant Name | | Date of Birth |
| Social Security Number | Home Phone | Cell Phone | | Social Security Number | Home Phone | Cell Phone |
| Email | | | | Email | | |
| Address (Street, City, Zip) | | | | Address (Street, City, Zip) | | |
| Marital Status | | # of Units _____ | | Marital Status | | # of Units _____ |
| Education | | | | Education | | |
| EMPLOYMENT INFORMATION | | | | | | |
| Name & Address of Employer | | Self Employed <input type="checkbox"/> Yes <input type="checkbox"/> No | | # of Years | | Business Phone () |
| | | | | | | |
| Position/Title | | Annual Income: | | Position/Title | | Annual Income: |
| If Employed Less Than 2 Years, Please List Prior Employer | | | | If Employed Less Than 2 Years, Please List Prior Employer | | |
| HOUSEHOLD INFORMATION | | | | | | |
| Please list ALL persons currently living in your household | | | | | | |
| Name | Date of Birth | Annual Salary (if any) | | Source of Income | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| PROPERTY INFORMATION | | | | | | |
| Address of Property to be improved if different from above | | | Property you are renovating is your primary Residence? <input type="checkbox"/> Yes <input type="checkbox"/> No | | Property Deed/Title in name of | |
| Value of Property | Date Purchased | Mortgage Balance | | Owner Occupied? <input type="checkbox"/> Yes <input type="checkbox"/> No | Amount Needed: | |
| Please list home repairs/renovations requesting: | | | | Do you have a written Codes Violation or ROP Report? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| ASSETS | | | ADDITIONAL INCOME | | | |
| Current Balance | | | Rental | | Monthly Amount | |
| Checking | | | SSI / Pension / Disability | | | |
| Savings | | | Child Support | | | |
| Retirement/other | | | Other | | | |

| NAME AND ADDRESS OF CREDITOR—LIST ALL DEBTS | MONTHLY PAYMENT AND MONTHS LEFT TO PAY | UNPAID BALANCE |
|---|--|----------------|
| Mortgage | | |
| Home Equity | | |
| Auto | | |
| Credit Cards | | |
| Other | | |
| Other | | |

CERTIFICATIONS

| | Applicant | Co-Applicant |
|--|--|--|
| Are you a US Citizen or A Permanent resident alien? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Have you had any outstanding judgments? If yes, Date Discharged _____ | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| In the last seven years, have you been declared bankrupt? If yes, Date Discharged _____ | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Have you had property foreclosed upon or given title or deed in lieu thereof, in the last seven years? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Are you a Party in a lawsuit? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Are you obligated to pay alimony, child support or separate maintenance? If yes, list amount: _____ | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Do you have any past-due obligations owed to or insured by an agency of the federal government? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Do you receive alimony, child support or separate maintenance? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Do you receive Social Security and/or disability benefits? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Are you disabled? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Are you a Veteran? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |

INFORMATION FOR GOVERNMENT MONITORING PURPOSES

The following information is requested by the Federal Government for certain types of loans related to a dwelling in order to monitor the lender's compliance with equal credit opportunity, fair housing and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. The law provides that a Lender may not discriminate either on the basis of this information, or 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 lender is required to note the information on the basis of visual observation and surname if you have made this application in person. If you do not wish to furnish this information, please check the box below. (Lender must review the above material to assure that the disclosures satisfy all requirements to which the lender is subject under applicable state law for the particular type of loan applied for.)

| | | | |
|--|--|--|--|
| BORROWER I do not wish to furnish this information | | CO-BORROWER I do not wish to furnish this information | |
| Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino | | Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino | |
| Race: <input type="checkbox"/> American Indian, Alaskan Native <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> Asian <input type="checkbox"/> Hispanic <input type="checkbox"/> White | | Race: <input type="checkbox"/> American Indian, Alaskan Native <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> Asian <input type="checkbox"/> Hispanic <input type="checkbox"/> White | |
| Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female Foreign Born <input type="checkbox"/> Yes <input type="checkbox"/> No | | Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female Foreign Born <input type="checkbox"/> Yes <input type="checkbox"/> No | |

How did you hear about us?: _____

SIGNATURE SECTION

I (We) hereby certify that I (We) are the owner(s) and occupant(s) of the property to be improved and that this is my (our) principal place of residence. I (We) certify that all the information provided in this application is true and correct to the best of my (our) knowledge and contains no willful misrepresentations. I (We) understand that any willful misstatement of material fact contained herein may be grounds for disqualification from this program. I (We) understand that disclosure of information requested is voluntary. However, failure to disclose certain information may result in a delay or disqualification of my (our) application for assistance.

I (We) understand that a lien will be placed against my (our) property for the total amount of the loan, plus fees, used for my (our) home repair project. The purpose of this lien is to ensure that I (We) live in this home for the specified period of time.

I (We) authorize the staff of UNHS NeighborWorks® HomeOwnership Center to obtain income and asset verifications from all household income sources. I (We) authorize UNHS NeighborWorks® HomeOwnership Center to also obtain credit reports in connection with this application and any Loan or Account established hereby, as well as any update, renewal, extension, review or collection thereof. I (We) understand that all information contained in this application will be kept confidential in accordance with the Freedom of Information Act. I (We) authorize the use of photographs of my property and/or myself for publication in brochures, commercials or other advertisements at the discretion of UNHS NeighborWorks® HomeOwnership Center.

I (We) acknowledge that I have read and received a copy of UNHS NeighborWorks® HomeOwnership Center's Privacy Policy. I (We) understand that any intentional or negligent representation(s) of the information contained on this application may result in civil liability and/or criminal liability under the provisions of Title 18, United States Code, Section 1001. I (We) understand that loan funds provided by UNHS may be federal dollars and that certain restrictions, guidelines and standards apply. I (We) understand that if I (We) refuse to accept and/or follow said standards as created by UNHS policies and programs that our application may be denied and no loan funds issued.

I (We) have read and understand all the information contained in this program application.

| | |
|--|------|
| Signature of Primary Applicant X | Date |
| Signature of Co-Applicant X | Date |

FOR OFFICE USE ONLY

| | | |
|-----------------------|---------------------|----------------------|
| Application Fee _____ | MO or Check # _____ | Date Received: _____ |
|-----------------------|---------------------|----------------------|

Notes :

Submit with Application:

- All required documentation on Document Checklist
- Check or money-order for **\$25.00 - Non-refundable Application Fee payable to: HomeOwnership Center**
- NYSERDA subsidy application, if applicable



UNHS NEIGHBORWORKS® HOMEOWNERSHIP CENTER

Please submit the following documents with the intake form/application for services from The HomeOwnership Center. Your application will not be filed if your documents are not complete. Please submit application by mail to: The HomeOwnership Center, 1611 Genesee Street, Utica, NY 13501, Attn: Julie Jalowiec.

**THE APPLICATION FEE IS \$25.
PLEASE PAY BY CHECK OR MONEY ORDER ONLY –
WE DO NOT ACCEPT CASH.**

| PAPERWORK NEEDED (Required) | ACCEPTABLE DOCUMENTATION |
|--|---|
| IDENTIFICATION | Photo ID (driver’s license or other photo ID with name, address and DOB) |
| PROOF OF PRIMARY RESIDENCE | Utility bill (must be electric/heating bill if applying for NYSERDA) |
| EVIDENCE OF MORTGAGE | Monthly mortgage statement (including escrow account, if applicable) or payment coupons. (N/A if mortgage is paid off.) |
| INCOME* Social Security income Disability | Award letter for current year, copy of checks, statement from bank or brokerage firm (if direct deposited) |
| Pension or Worker’s Comp Child Support/Alimony | Award letter, copy of checks |
| Wages (Pay Check Stubs) Rental (see below) | 4 most recent pay stubs (if paid weekly) 2 most recent (if paid bi-weekly). Earnings statement that shows gross wages and deductions. |
| TAX RETURNS FOR PREVIOUS 2 YEARS | Copy of FILED FEDERAL tax returns for previous 2 years, including all schedules and W-2’s. (N/A if not required to file/ 3 years if self employed.) Please do NOT submit state returns.0 |
| BANK STATEMENTS FOR 3 MONTHS | Three (3) most recent (3 months worth) of bank statements for checkings and/or savings accounts. If you do not save your monthly statements, please request a 3-month print out from your financial institution. |
| COPY OF DEED | Copy of deed. Must have full description and date of record. |
| PROOF OF PAID PROPERTY TAXES School, County and City/Village For CURRENT year | Copy of tax receipts with paid stamp for current year’s taxes. Copy of escrow statement if taxes are paid through escrow. If no money is owed for school taxes due to STAR exemption, please bring proof of zero balance. |
| HOMEOWNER’S INSURANCE | Deck page (<u>shows the annual premium</u>) and proof it is paid up to date |
| IF APPLICABLE, PLEASE ALSO BRING: | ACCEPTABLE DOCUMENTATION |
| ROP Inspection Report/Written Code Violation | ROP Inspection Report/Written Code Violation |
| Tenant’s Information for NYSERDA | Proof of income plus last year’s tax return |
| Rental income | Copy of check from tenant, receipt or notarized statement listing each tenant/unit and the rent received per month. |

*Income verification must be submitted for ALL income earners in the household over the age of 18, regardless of ownership status.

UNHS NeighborWorks®
HomeOwnership Center
1611 Genesee St.
Utica, NY 13501
(315) 724-4197

Post Purchase Education and Workshops

Class Description:

The HomeOwnership Center offers an eight-hour Post-Purchase education program. As a member of NeighborWorks® Network, The HomeOwnership Center has certified educators to present comprehensive information on financial fitness and home maintenance issues.

The class consists of 8 hours of interactive classroom learning. The course is designed to educate consumers in matters of money management, which includes basic budgeting and understanding how to use credit wisely. It is also designed to review the home purchase process and update consumers on all of the changes in the banking and real estate worlds. The class is designed to help consumers with:

- Short-term and long-term financial goals
- Developing new skills to manage finances wisely
- Understanding the financial system
- Maximizing income, savings and assets
- Protecting your home and your finances

In order to complete the Post-Purchase Class, you will take 8 hours of class time that includes:

- **Money Management**
- **Understanding Your Credit**
- **Getting a Loan**
- **Purchase Process and Real Estate Contracts**
- **Keeping your Home and Managing your Finances**
- **Overview of The HomeOwnership Center's Housing Rehab Programs**

In addition to the classes, we also offer Post-Purchase Workshops. Workshops are typically held once a month on various topics concerning managing finances, home repairs, credit and identity theft and more. Contact the HomeOwnership Center to learn more.

Past workshops have included the following topics:

- Insurance - What do I need and why do I need it?
- Home Maintenance - Fix it Before it gets worse!
- Your Home - Home Safety and Energy Efficiency

POST-PURCHASE CLASS REGISTRATION FORM

NAME(S): _____

ADDRESS: _____

PHONE:

NUMBER OF PEOPLE ATTENDING: _____

CLASS

DATE(S): _____

❖ **Cost:** Free!

❖ **Cancellation Policy:** It is requested that you notify The HomeOwnership Center at least 24 hours in advance so we can plan on expected attendance.

❖ **Certification:** At completion of the class, you will receive a certification for the course, which qualifies you for many of the post-purchase products offered by The HomeOwnership Center.

2011 Post Purchase Education Schedule

| Month | Tuesday and Wednesday Dates (5-7 P.M.) *2 weeks consecutively | Saturday Dates* (9 A.M. - 5 P.M.) 45 min. lunch break on your own (note: lunch will not be provided) |
|-----------|---|--|
| January | January 4, 5, 11 and 12 | January 8 or 22 |
| February | February 1, 2, 8 and 9 | February 12 or 26 |
| March | March 15, 16, 22 and 23 | March 12 or 26 |
| April | April 12, 13, 19 and 20 | April 9 or 23 |
| May | May 3, 4, 10 and 11 | May 7 or 14 |
| June | June 7, 8, 14 and 15 | June 11 or 25 |
| July | July 12, 13, 19 and 20 | July 9 or 23 |
| August | August 16, 17, 23 and 24 | August 6 or 20 |
| September | September 13, 14, 20 and 21 | September 10 or 24 |
| October | October 18, 19, 25 and 26 | October 15 or 29 |
| November | November 8, 9, 15 and 16 | November 5 or 19 |
| December | Nov. 29, 30, Dec. 6 and 7 | December 3 or 10 |

* The second Saturday class listed each month will take place if the first Saturday class is full. You will be registered for the first class. Once the first class is full, we will accept registration and will hold the second class if our minimum attendance is met. If you are unsure which class you will be attending, please call 724-4197 Monday through Thursday between 8 a.m. and 4:30 p.m.