



OPERATION 1ST HOME HOMEOWNERSHIP AND DOWN PAYMENT ASSISTANCE PROGRAMS FOR THE <u>COUNTY OF CHESTERFIELD</u> (RACHEL'S WAY)

- **You must be a first time homebuyer** (have not owned a home in three years).
- **C**annot have any co-borrowers that are not a part of the household.
- □ You must meet the household income guidelines established by HUD for this Area. (Must be below 80% of the Area Median Income and be able to verify the income of all members of the household that will be living in the house).
- **C**annot have more than 10% of the sales price in *liquid assets* (cash, savings, 401K, CD's etc.).
- Must attend an approved Homebuyer Education Class. We do not accept Online Certificates. We hold VHDA Homebuyer Classes monthly in our office.
- Must be able to get loan approval acceptable to our program guidelines. Your lender must be on VHDA's Approved Lender List: <u>www.vhda.com</u>
- □ You must use one of our Preferred Closing Agents for this forgivable loan program.
- □ Your *minimum* out of pocket investment in the transaction is 1% of the Sales Price of the house. Your POC's (paid outside of closing) which includes the Earnest Money Deposit, Appraisal fee, Credit Report, Lock in Fee, Inspection Report, will count toward your 1% contribution.
- □ All Judgments and collections must be satisfied before closing.
- **D** We recommend a Whole House Inspection be done using an Inspector on our Approved List, but it is not required.
- We must have all required documents before we can approve you and order funds for closing. Funds can sometimes take up to 15 to 20 working days to arrive!

To help make our homes more affordable to all of our buyers, Down Payment and Closing Cost Assistance is attached to all of our homes for buyers above and below 80% of Area Median Income (AMI).

During the process please do not do anything that will potentially interfere with being approved for your Mortgage Loan i.e., run up your balances on your credit card(s), take out a new loan, buy an automobile, or go shopping for furniture and household items before closing. If you have any questions please give me a call!

Corey Harvey Housing Counseling 804-231-4449 ex. 301 <u>charvey@scdhc.com</u> www.scdhc.com

SOUTHSIDE COMMUNITY DEVELOPMENT & HOUSING CORPORATION

1624 Hull Street • Richmond, VA 23224 • (804) 231-4449 (Phone) • (804) 233-3020 (Fax)

OPERATION 1ST HOME

APPLICATION

HUD# _____ CMAX # _____

□ SCDHC HOP_____

DPA Only

1. PERSONAL INFORMATION

APPLICANT:			Date of Birth	Soc. Sec. No
	(Last)	(First)	(MI)	

Residences for the past 2 years

From Month/Year	To Month/Year	Street Address City	State	Zip	Landlord's Name	Landlord's Address	Monthly Payment

Please name people who will live in the home

Name	Relationship	Date of Birth	Sex	Occupation	Monthly Income

CO-APPL	ICANT:				Date of	Birth	Soc. Sec. N	lo
	(Last)	(I	First)	(MI)				
Residence	s for the past	2 years						
From	То	Street Address	_			Landlord's	Occupation	n Monthly Payment

Month/Year
Month/Year
State
Zip
Name
Occupitor

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2. EMPLOYMENT INFORMATION

APPLICANT:

List all work experience (beginning with your present position). List all jobs you have held in the last 5 years.

From	То	Employer's Name	Phone No.	Contact's Name	Reason for Leaving	Annual Salary	Position/Title
Mo./Yr.	Mo./Yr.	Employer's Address					

CO-APPLICANT:

List all work experience (beginning with your present position). List all jobs you have held in the last 5 years.

From	То	Employer's Name	Phone Number	Contact Name	Reason for Leaving	Annual Salary	Position/Title
Mo./Yr.	Mo./Yr.	Employer's Address					

3. **BANKING INFORMATION**

Name of Bank	Address	Type of Account	Account Number	Cur. or Avg. Bal.

4. **ASSETS**

Make and Model of Vehicle_____

Make and Model of Vehicle_____

5. LIABILITIES (List All Debts, including alimony, child support, banks, etc.)

Lender	Account Number	Original Amount Owed	Monthly Payment	Balance

Year_____

Have you filed for bankruptcy in the last 10 years, if so please state why?

Do you have any outstanding judgments and collections?

I affirm that all of the answers given on this application are all true and accurate and made for the purpose of purchasing a home, applying for help with down payment assistance or to access other housing related services we offer. I authorize you to investigate my credit worthiness as part of the review process. I am aware that there is a \$20.00 charge Per Applicant for a Credit Report that must be paid at the time that services are rendered.

Signature of Applicant	Date
Signature of Co-Applicant	Date

Please submit this application to SCDHC located at 1624 Hull St. Richmond, VA 23224.

APPLICANT CHECKLIST

As we move forward we will need from you supporting documents that will include the following :

- The most recent pay stub for each job held
- A benefits letter (if you receive public benefits such as: SSI, SS),
- Court Order for Child Support
- Bank statements for the past three months for all accounts
- Income tax returns: 1040's and W-2's for the past two years
- If you have adverse credit issues, please include the following:
 - Verification of payments for Judgments, Collections, Taxes, Student Loans, Child Support etc.
- Discharge Letter if you have filed bankruptcy within the past ten years (you *may* also be asked for the list of creditors covered in the bankruptcy).

We may need additional information depending on individual program requirements so please do not throw away any documents while in this process. You will save valuable time and energy as a result.

Please do not leave any spaces blank, if they do not apply, please write/type, "NA" (not applicable)

To assist us in our future Marketing Efforts, please tell us how you heard about us _____

Southside		Intake Form						
Comm	nunity			Foreclosure Intervention				
Devel								
	Corporation	Date:	CMax #:	HUD#				
1624 Hull Street • Richmond, VA 23 Phone (804) 231-4449 • Fax (804) 2			terested in being add	ded to our mailing list				
Clien	t Information			Fransform Economically Dis-				
Name:			tainable communities by	nto viable, thriving, and sus- providing quality, affordable				
Address:				homes, and homeownership counseling services". SCDHC is a HUD-Approved Housing Counseling				
Address 2:			Agency that provides of	one-on-one counseling for				
City:	State:		foreclosure. We also pro	e their first home or prevent ovide down payment assis-				
	Zip:		-	e homebuyers, and facilitate lucation and Credit Work-				
	Preferred		•	nd renovates homes in the rfield and Henrico Counties,				
Cell Phone:	Preferred	contact	and provides a monthly	tour of the homes. Please				
E-mail:	Preferred	contact	visit our website at <u>www.scdhc.com</u> for more information, or to register for a workshop or housing tour.					
	C Website D River City Bl	ues 🗖 F	IUD 🗍 Lender 🗍 Re	al Estate Agent D Friend				
	HUD Required De							
Please choose one respo	onse from each category, ²	1-6, belo	w .					
1. Ethnicity: □ ⊦	lispanic D Non-	-Hispanio	;					
2. Race:	American Indian	an	Black/African-A	American				
	Pacific Islander/Hawaiian		□ White					
3. # in Household:	#C	Depende	nts:					
Gender: 🔲			te of Birth:					
4. Education Level: □ N	No high school diploma 🛛	High scł	nool diploma 🗖 GED 🛛	Vocational certificate				
College, no deg	ree 🛛 Associates	degree						
Bachelors Degree	ee 🛛 Masters Deg	gree	Doctoral degree	ee				
5. Marital Status:	Unmarried 🛛 Mar	ried	Divorced	Active Military				
6. Citizenship:	US Citizen 🛛 Resid	dent	□ Non-Resident	□ Veteran				
Household Income:	Social Securi	ty #	D R	Rent 🛛 Own 🗆 Other				
Co-Applicant:	Soci	ial Secur	ity #	DOB:				

DISCLOSURE

Southside Community Development & Housing Corporation is an organization that provides homeownership counseling to homebuyers and foreclosure prevention counseling for homeowners. Southside Community Development & Housing Corporation assists clients through homeownership counseling and education services.

There are many real estate brokers, mortgage lenders and mortgage brokers and you, as a client of Southside Community Development & Housing Corporation, are free to choose whomever you please to provide these types of services to you.

AUTHORIZATION FORECLOSURE PREVENTION CLIENTS

I/We authorize Southside Community Development & Housing Corporation, its staff or representatives, to act on my/our behalf for the purpose of seeking a resolution with regard to the property listed above. I/We authorize our lending institution/mortgage company to fax, mail, or email any items requested by Southside Community Development & Housing Corporation in reference to our mortgage delinquency immediately. I understand that Southside Community Development & Housing Corporation provides foreclosure mitigation counseling after which I will receive a written action plan consisting of recommendations for handling my finances, possibly including referrals to other housing agencies as appropriate. I understand that Southside Community Development & Housing Corporation receives Congressional funds through the National Foreclosure Mitigation Counseling (NFMC) program and, as such, is required to share some of my personal information with NFMC program administrators or their agents for purposes of program monitoring, compliance and evaluation. I give permission for NFMC program administrators and/or their agents to follow-up with me for the purposes of program evaluation. I acknowledge that I have received a copy of the Southside Community Development & Housing Corporation Privacy Policy.

AUTHORIZATION ALL CLIENTS

Pursuant to Public Law 91-50B, Title VI, Section 604 (2) & (3) A & B and Section 610 (a) – (d), I/We hereby authorize any Credit Reporting Agency to disclose any consumer credit information to Southside Community Development & Housing Corporation and hereby name Southside Community Development & Housing Corporation as the authorized "person of my choosing". I/We authorize them to obtain my credit report for the purpose of discussing and/or negotiating all matters regarding pre- and post-purchase counseling. Additionally, you may discuss my file with /Southside Community Development & Housing Corporation personnel (Law No. 1610 (d) 1). I understand that I may be referred to other housing services of the organization or another agency or agencies as appropriate that may be able to assist with particular concerns that have been identified. I understand that I am not obligated to use any of the services offered to me. A counselor may answer questions and provide information, but not give legal advice. If I want legal advice, I will be referred for appropriate assistance. I understand that Southside Community Development & Housing Corporation provides information and education on numerous loan products and housing programs and I further understand that the housing counseling I receive from Southside Community Development & Housing Corporation in no way obligates me to choose any of these particular loan products or housing programs.

PRIVACY STATEMENT

Southside Community Development & Housing Corporation 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. 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 monitors and others only with your authorization and signature on the Counseling Agreement. We may also use anonymous aggregated case file information for the purpose of evaluating our services, gathering valuable research information and designing future programs. I acknowledge that this document also serves as Southside Community Development & Housing Corporation's Privacy Policy.

ACKNOWLEDGMENT

I/we understand that Southside Community Development & Housing Corporation provides information and education on numerous loan products and housing programs and I further understand that the housing counseling I receive from Southside Community Development & Housing Corporation in no way obligates me to choose any of these particular loan products or housing programs.

I/we have read and received a copy of this disclosure form.

APPLICANT SIGNATURE

DATE

CO-APPLICANT SIGNATURE

DATE

Southside Community Development

1624 Hull Street, Richmond, VA 23224 · Phone: 804-231-4449 · www.scdhc.com