

Thank you so much for your interest in Habitat for Humanity! We are so glad you are here. Our hope is that the path toward homeownership will be an informative, smooth and engaging partnership together. We look forward to getting started! Our first step is to have you fill out and submit the following Intake Packet.

As you get started on this path toward homeownership, what service areas are you most interested in? Please check any of the following:

| Financial Coaching (interested in purchasing a home, want to become stable with finances to |
|---|
| pursue life goals)  |
| Foreclosure Avoidance Counseling  |
| Rental Counseling   |
| Homeless Avoidance Counseling   |
| Individual HomeBuyer Education Class (already working with a lender and a realtor)          |
| Group HomeBuyer Education Class (thinking about home ownership and have questions)          |
| Financial Management Education Class  |
| Rural Development Loan Program  |
| Homeowner Services Counseling (already a homeowner, but not behind on mortgage)             |







## **INTAKE FORM**

| PERSONAL INFORMATION:                      |                 |                                      |
|--|-----------------|--------------------------------------|
| Applicant Name:                            |                 | Today's Date:                        |
| Co Applicant Name:                         |                 | Relationship to Appl:                |
| Address:                                   |                 |                                      |
| City:                                      | Zip:            | County:                              |
| Phone Number:                              |                 | Home Cell Work                       |
| Other Contact Number:                      |                 |                                      |
| Email address:                             |                 | Household Language:                  |
| Were you referred by someone?              | No              |                                      |
| If yes, Name and Phone Number: _           |                 |                                      |
| Are you interested in Financial Coaching?  | ☐ Yes ☐ No      |                                      |
| Are you interested in Home Ownership?      | ☐ Yes ☐ No      |                                      |
| Are you currently working with a local Hab | itat Office? 🔲  | Yes No                               |
| If yes, Habitat Office, Contact Name       | e and Phone Nur | nber:                                |
| Applicant Marital Status: Married Si       | ingle 🗌 Separat | red Divorced                         |
| MILITARY SERVICE: (please check)           |                 |                                      |
| Applicant is a veteran                     | Applicant is    | Active Military                      |
| Co-Applicant is a veteran                  | Co-Applicar     | nt is Active Military                |
| RACE OF APPLICANT: (please check)          |                 | RACE OF CO-APPLICANT: (please check) |
| American Indian/Alaskan Native             |                 | American Indian/Alaskan Native       |
| Asian                                      |                 | Asian                                |
| Black/African American                     |                 | Black/African American               |
| ☐ Native Hawaiian/Pacific Islander         |                 | ☐ Native Hawaiian/Pacific Islander   |
| White                                      |                 | White                                |
| Multi-Racial                               |                 | ☐ Multi-Racial                       |
| Choose not to respond                      |                 | Choose not to respond                |





| Applicant Education:  |  | Co-Applicant Ed                            |                                    | _        |          |  |  |  |
|---|--|--|------------------------------------|----------|----------|--|--|--|
| High School Diploma/ GED [  | Yes No                                     | High School Dip                            | oma/ GED                           | Ш        | Yes  No  |  |  |  |
| Associate's Degree  | Yes No                                     | Associate's Degi                           | ee                                 |          | Yes No   |  |  |  |
| Some College [  | Yes No                                     | Some College                               | Some College                       |          |          |  |  |  |
| Bachelor's Degree [   | Yes No                                     | Bachelor's Degr                            | ee                                 |          | Yes No   |  |  |  |
| Master's Degree [   | Yes No                                     | Master's Degree                            | !                                  |          | Yes No   |  |  |  |
| Educational or vocational training [ If 'yes', what training?                 |  |  | ocational trainin<br>hat training? |          | Yes No   |  |  |  |
| If 'yes', date you completed tr   | aining:                                    | If 'yes', o                                | ate you complet                    | ed train | ning:    |  |  |  |
| RENTAL INFORMATION:   |  |  |                                    |          |          |  |  |  |
| Are you a current homeowner?  | Yes No                                     |  |                                    |          |          |  |  |  |
| Are you a first-time home buyer? [  | Yes No If 'no                              | ', what years were y                       | ou a homeowne                      | r?       |          |  |  |  |
| Do you currently rent?  | Yes No Wha                                 | t is your monthly rer                      | ntal payment? _                    |          |          |  |  |  |
| Do you currently live in a rural area? [                                      | Do you currently live in a rural area?  No |  |                                    |          |          |  |  |  |
|   |  |  |                                    |          |          |  |  |  |
| How long have you lived at your curre   | ent residence? (in y                       | ears / months)                             |                                    |          |          |  |  |  |
| How long have you lived at your curred Do you have a Section 8 Housing Choice |  |  |                                    | _        |          |  |  |  |
|   |  |  |                                    | _        |          |  |  |  |
|   | ice Voucher or do y                        | ou live in Public Hou                      |                                    | _        |          |  |  |  |
| Do you have a Section 8 Housing Choi  | ice Voucher or do y                        | ou live in Public Hou                      | sing? Yes Male or Disa             | ] No     | Hispanic |  |  |  |
| Do you have a Section 8 Housing Choi  | ice Voucher or do y                        | ou live in Public Hou                      | sing?                              | ] No     |          |  |  |  |
| Do you have a Section 8 Housing Choi  | ice Voucher or do y                        | ou live in Public Hou s) Social Security # | Male or Disa                       | ] No     | Hispanic |  |  |  |
| Do you have a Section 8 Housing Choise HOUSEHOLD INFORMATION: (Include Name   | ice Voucher or do y                        | ou live in Public Hou s) Social Security # | Male or Disa                       | ] No     | Hispanic |  |  |  |
| Do you have a Section 8 Housing Choise  HOUSEHOLD INFORMATION: (Include  Name | ice Voucher or do y                        | ou live in Public Hou s) Social Security # | Male or Disa                       | ] No     | Hispanic |  |  |  |





<sup>\*</sup>additional family members should be discussed and will be added to your intake form at the initial phone appointment.

| Employment  SSI  FIP  Food Stamps Unemployment  Veterans Child Support Other:  Household Net Worth:  [money in checking & savings accounts, auto(s) value, furniture/clothing value, items: car loans, students loans, credit card balances, personal loans, etc] equal  EMPLOYMENT INFORMATION: Applicant Employment  | any other item of value] minus  |
|--|---------------------------------|
| SSI FIP Food Stamps Unemployment Veterans Child Support Other:  Household Net Worth: [money in checking & savings accounts, auto(s) value, furniture/clothing value, items: car loans, students loans, credit card balances, personal loans, etc] equalements  EMPLOYMENT INFORMATION:   | any other item of value] minus  |
| Flood Stamps  Unemployment  Veterans Child Support Other:  Household Net Worth:  money in checking & savings accounts, auto(s) value, furniture/clothing value, tems: car loans, students loans, credit card balances, personal loans, etc] equalements  EMPLOYMENT INFORMATION:   | any other item of value] minus  |
| Jnemployment  Veterans Child Support Other:  Household Net Worth:  money in checking & savings accounts, auto(s) value, furniture/clothing value, tems: car loans, students loans, credit card balances, personal loans, etc] equalements  EMPLOYMENT INFORMATION:   | any other item of value] minus  |
| Unemployment  /eterans Child Support Other:  Household Net Worth: money in checking & savings accounts, auto(s) value, furniture/clothing value, tems: car loans, students loans, credit card balances, personal loans, etc] equalements  EMPLOYMENT INFORMATION:  | any other item of value] minus  |
| Veterans Child Support Other:  Household Net Worth: Imoney in checking & savings accounts, auto(s) value, furniture/clothing value, tems: car loans, students loans, credit card balances, personal loans, etc] equalements of the control of the cont | any other item of value] minus  |
| Child Support Other:  Household Net Worth: [money in checking & savings accounts, auto(s) value, furniture/clothing value, items: car loans, students loans, credit card balances, personal loans, etc] equalements of the property of the pro | any other item of value] minus  |
| Other:  Household Net Worth:  [money in checking & savings accounts, auto(s) value, furniture/clothing value, items: car loans, students loans, credit card balances, personal loans, etc] equalements of the properties of the prop | any other item of value] minus  |
| Household Net Worth:  [money in checking & savings accounts, auto(s) value, furniture/clothing value, items: car loans, students loans, credit card balances, personal loans, etc] equal EMPLOYMENT INFORMATION:   |                                 |
| Applicant Employment   |                                 |
| Current employer:Employer phone number:  |                                 |
| How long have you worked at current job? Pay Rate:   |                                 |
| Start Date: Business Type: (ex: construction, health care, education,  |                                 |
| What is your job title?  |                                 |
| How many years have you been in the above profession?  |                                 |
| Co-Applicant Employment:   |                                 |
| Current employer:  | Employer phone                  |
| How long have you worked at current job? Pay Rate: _   | Hours/Week:                     |
| Start Date: Business Type: (ex: construction, health care, education,  | etc)                            |
| What is your job title?  |                                 |
|  |                                 |
| How many years have you been in the above profession?  |                                 |
| Applicant  | Printed Na                      |
| $\hfill \square$ I acknowledge my electronic signature and give permission for it to be i  | n place of my written signature |
| Co-Applicant Printed Name  |                                 |





☐ I acknowledge my electronic signature and give permission for it to be in place of my written signature

### **AUTHORIZATION AND RELEASE OF INFORMATION**

#### Confidentiality is important to us and we will always protect your privacy.

I/We understand that in signing this authorization and release of information, I/We agree to actively participate in the Housing and Education Services of Habitat for Humanity of Michigan. I/We understand that these services are completely voluntary. By signing this form, I/We understand the following:

- I/We authorize Habitat for Humanity of Michigan (HFHM), its agents, employees or Habitat Affiliates to request income and asset information from all income providers, those entities listed on the Intake Form and any other associated application forms. This form also authorizes the gathering of mortgage, credit bureau, landlord and personal information pertinent to the Housing and Education Services of HFHM.
- I/We understand a referral to other services of HFHM or another appropriate agency may be made to assist with particular concerns that have been identified, including housing programs and loan products; I/We will not be obligated to use any of the services offered.
- I/We allow HFHM to provide this information to its agents, employees or Affiliates involved with the Financial Coaching Network for the purposes in this program. The agents, employees or Affiliates involved with the HFHM Financial Coaching Network may also provide information to HFHM.
- This release of information also gives permission to share my information to and from the Affiliate Mortgage Services.
- I/We understand that this agency receives funds through HUD, NeighborWorks and other grantors and as such, is required to share some of my personal information with program administrators or their agents for the purposes of program monitoring, compliance and evaluation.
- I/We allow contact to be made on my/our behalf with representatives from mortgage, attorney, collection and credit bureau companies.
- I/We understand a counselor may provide information and answer questions, but cannot give legal advice. If there is need of legal services, I/we will be referred to an attorney for assistance.
- I/We understand that private companies (collection companies, etc.) may not receive our personal information authorized by this form unless disclosure of such information is required under State or Federal Law.
- Following is the list of people / agencies that I do NOT want to have my personal information:

| Applicant Signature:                                     | Date:   |
|--|---|
| ☐ I acknowledge my electronic signature and give permis  | ssion for it to be in place of my written signature |
| Co-Applicant Signature:                                  | Date:   |
| ☐ I acknowledge my electronic signature and give permis  | ssion for it to be in place of my written signature |
| Other Household Adult Signature:                         | Date:   |
| ☐ I acknowledge my electronic signature and give permis  | ssion for it to be in place of my written signature |
| Counselor Signature:                                     | Date:   |
| ☐ I acknowledge my electronic signature and give permise |   |





## FREEDOM TO CHOOSE DISCLOSURE

Habitat for Humanity of Michigan (HFHM) is a non-profit financial coaching and housing counseling agency that supports a network of Habitat for Humanity Affiliate Offices in Michigan, which are non-profit housing developers and support services agencies.

Our goal in providing financial coaching and housing counseling is to help you make the best decision about your finances, housing and mortgage lending needs.

In addition to our counseling services, HFHM offers the following programs and services:

- Down Payment Assistance Programs (through HOME, FHLBI or others)
- Neighborhood Revitalization and Neighborhood Improvement Programs
- Habitat for Humanity Michigan Fund, a wholly owned subsidiary of HFHM
- Rural Development Loan Packaging Program
- Affiliation with sixty-two Habitat for Humanity offices in Michigan
- Michigan Regional Distribution Center for Habitat for Humanity ReStores

You may hear about or be referred to these and other programs during discussions about our services.

You have the right to work with any financial coaching and housing counseling agency and any mortgage company; you have the right to apply for any housing program or to use any mortgage product that you choose. Please see the attached list of resources and programs in your area. We encourage you to shop around for the best program, product and services that fit your circumstances. Please see page two of this form for a brief description of the services we offer.

<u>Agency Relationships</u>: HFHM has financial affiliation or professional affiliations with HUD, NeighborWorks America, USDA Rural Development, and the State of Michigan; insurance companies like Allstate and State Farm, and banks including Bank of America, Flagstar, Comerica, Fifth Third, Huntington, Wells Fargo and JP Morgan Chase. As a housing counseling program participant, you are not obligated to use the products and services of HFHM or our industry partners.

You have the freedom to choose any program or product you wish; you are not obligated to work with Habitat for Humanity of Michigan or any Affiliate agency.

| Your   | signature  | below    | ındıcates  | you l  | have  | read   | and | understand | these | statements. | Regardless | of | your |
|--------|------------|----------|------------|--------|-------|--------|-----|------------|-------|-------------|------------|----|------|
| decisi | on, we are | e please | d to offer | our se | rvice | s to y | ou. |            |       |             |            |    |      |
|        |            |          |            |        |       |        |     |            |       |             |            |    |      |
|        |            |          |            |        |       |        |     |            |       |             |            |    |      |

| Signature                 | Date                                  | Printed Name                              |
|---------------------------|---------------------------------------|---|
| I acknowledge my electron | nic signature and give permission for | it to be in place of my written signature |
| - ·                       |                                       |   |
|                           |                                       |   |
|                           |                                       |   |

I acknowledge my electronic signature and give permission for it to be in place of my written signature.



## FREEDOM TO CHOOSE DISCLOSURE

### The following services are offered by Habitat for Humanity of Michigan:

**Pre Purchase Counseling:** This service is provided individually to consumers and focuses on readiness and preparation for home ownership. We offer goal setting and action planning, and walk with consumers as they remove barriers to their homeownership goal.

**Pre-Purchase Home Buyer Education Workshops**. Our workshops include information on various home ownership options and programs to assist first time home buyers. We provide information about **Fair Housing and Fair Lending, as well as Predatory Lending Avoidance** as a part of the pre purchase education workshops, thru individual counseling or as a stand-alone workshop.

Resolving or Preventing Mortgage Delinquency or Default. HFHM offers foreclosure avoidance strategies and works with consumers as an advocate with their lenders to help navigate the loss mitigation process.

Non-Delinquency Post-Purchase Counseling including Home Repair and Improvement: HFHM educates homeowners on a variety of topics individualized to their personal needs. We also help homeowners determine necessary repairs and obtain access to home repair grants and/or loans available through community, state and federal resources

Locating, Securing, or Maintaining Residence in Rental Housing. We provide information on HUD rental and rent subsidy programs, other federal, state or local rental assistance. We provide information on landlord tenant laws, budgeting for rent payments and providing assistance with locating alternative housing.

**Financial Management, Budget and Credit Workshops:** HFHM offers the following financial management topics during the following two- to three-hour group workshops: Budgeting, Credit Repair, Debt Reduction, Saving and Investing, Insurance and Long Term Planning, and Consumer Protection.

**Financial Management, Budgeting and Credit Counseling:** HFHM provides individual counseling on financial management, as a follow up to workshop attendance or as a stand-alone service, in order to further assist consumers in focusing on their unique situation.

**Homeless Assistance:** We provide referrals to emergency shelters, coordinated assessment providers, homeless services and programs available in their communities, other emergency services and transitional housing programs.

Revised 4/2020



## Monthly Budget

| DATE                                     |           |        |                |
|--|-----------|--------|----------------|
| INCOME                                   | ESTIMATED | ACTUAL | DIFFERENCE +/- |
| Wages (NET – TAKE HOME)                  |           |        |                |
| Other household wages                    |           |        |                |
| Child Support Income                     |           |        |                |
| Social Security/SSI/Disability           |           |        |                |
| Food Stamps                              |           |        |                |
| Other Income                             |           |        |                |
| TOTAL MONTHLY INCOME                     |           |        |                |
|  |           |        |                |
| FIXED EXPENSES                           |           |        |                |
| Housing ~ Rent/Mortgage/Land Contract    |           |        |                |
| Auto Loan                                |           |        |                |
| Auto Insurance                           |           |        |                |
| Student Loan                             |           |        |                |
| Personal Loan / Line Of Credit           |           |        |                |
| Child Support Payment                    |           |        |                |
| Child Care Expenses                      |           |        |                |
| Savings                                  |           |        |                |
| Other Fixed Expense                      |           |        |                |
| TOTAL MONTHLY FIXED EXPENSES             |           |        |                |
|  |           | •      |                |
| FLEXIBLE EXPENSES                        |           |        |                |
| Groceries                                |           |        |                |
| In Between Grocery Expenses              |           |        |                |
| Gas Bill / Propane                       |           |        |                |
| Electric Bill                            |           |        |                |
| Water                                    |           |        |                |
| Trash Pick Up                            |           |        |                |
| Home Telephone                           |           |        |                |
| Cell Phone                               |           |        |                |
| Internet Service                         |           |        |                |
| Cable Service                            |           |        |                |
| Automobile Gas, Oil Changes              |           |        |                |
| Auto Repair/Maintenance                  |           |        |                |
| Movies/Movie Rental                      |           |        |                |
| Laundry/Dry Cleaning                     |           |        |                |
| Pets                                     |           |        |                |
| Ongoing Medical Expenses ~ out of pocket |           |        |                |
| Dues/Subscriptions                       |           |        |                |
| Money Orders or Cashiers Checks          |           |        |                |
| Overdraft, ATM Fees, Check Cashing fees  |           |        |                |

Hair Care/Nail Care

## Monthly Budget

|  | Estimated        | Actual   | Difference +/- |
|--|------------------|----------|----------------|
| Clothing                                   |                  |          |                |
| Toiletries/Cosmetics                       |                  |          |                |
| Cigarettes and/or Alcohol                  |                  |          |                |
| Activities & Entertainment                 |                  |          |                |
| Dining Out – Lunches & Dinner              |                  |          |                |
| Charity or Tithing                         |                  |          |                |
| Education Expenses                         |                  |          |                |
| Kids' School Lunch Expenses                |                  |          |                |
| Allowance/Children's Activities            |                  |          |                |
| Other Flexible Expenses                    |                  |          |                |
| TOTAL MONTHLY FLEXIBLE EXPENSES            |                  |          |                |
| 000  | ASIONAL EXPENSES |          |                |
| Medical                                    | ASIONAL EXPENSES |          |                |
| Dental                                     |                  |          |                |
| Vision                                     |                  |          |                |
| Water Bill                                 |                  |          |                |
| Vacation                                   |                  |          |                |
| Birthdays                                  |                  |          |                |
| Christmas/Holidays                         |                  |          |                |
| TOTAL MONTHLY OCCASIONAL EXPENSE           | S                |          |                |
| DERT                                       | DEDUCING EVDENCE | C        | ·              |
| Credit Card #1                             | REDUCING EXPENSE | <u> </u> |                |
|  |                  |          |                |
| Credit Card #2                             |                  |          |                |
| Credit Card #3                             |                  |          |                |
| Credit Card #4                             |                  |          |                |
| Other Debt Reducing Expense:               |                  |          |                |
| Other Debt Reducing Expense:               |                  |          |                |
| Other Debt Reducing Expense:               |                  |          |                |
| TOTAL MONTHLY DEBT REDUCING EXPENSES       |                  |          |                |
|  |                  |          | I              |
| COMPARE                                    | INCOME AND EXPE  | NSES     |                |
| Total Monthly Income                       | \$               |          | _              |
| Total Monthly Expenses                     | \$               |          | _              |
| DIFFERENCE ~ GAIN/(LOSS)                   | \$               |          | _              |
| Money to put toward further Debt Reduction | n Items \$       |          | _              |

U.S. Department of Housing and Urban Development Federal Housing Administration (FHA)



OMB Approval No: 2502-0538 (exp. 06/30/2021)

# For Your Protection: Get a Home Inspection

## You must make a choice on getting a Home Inspection. It is not done automatically.

You have the right to examine carefully your potential new home with a professional home inspector. But a home inspection is not required by law, and will occur only if you ask for one and make the arrangements. You may schedule the inspection for before or after signing your contract. You may be able to negotiate with the seller to make the contract contingent on the results of the inspection. For this reason, it is usually in your best interest to conduct your home inspection as soon as possible if you want one. In a home inspection, a professional home inspector takes an in-depth, unbiased look at your potential new home to:

- ü Evaluate the physical condition: structure, construction, and mechanical systems;
- ü Identify items that need to be repaired and
- ü Estimate the remaining useful life of the major systems, equipment, structure, and finishes.

## The Appraisal is NOT a Home Inspection and does not replace an inspection.

An appraisal estimates the market value of the home to protect the lender. An appraisal does not examine or evaluate the condition of the home to protect the homebuyer. An appraisal only makes sure that that the home meets FHA and/or your lender's minimum property standards. A home inspection provides much more detail.

## FHA and Lenders may not Guarantee the Condition of your Potential New Home

If you find problems with your new home after closing, neither FHA nor your lender may give or lend you money for repairs. Additionally, neither FHA nor your lender may buy the home back from you. Ask a qualified home inspector to inspect your potential new home and give you the information you need to make a wise decision.

## Your Home Inspector may test for Radon, Health/Safety, and Energy Efficiency

EPA, HUD and DOE recommend that houses be tested and inspected for radon, health and safety, and energy efficiency, respectively. Specific tests are available to you. You may ask about tests with your home inspector, in addition to the structural and mechanical systems inspection. For more information: Radon -- call 1-800-SOS-Radon; Health and Safety – see the HUD Healthy Homes Program at www.HUD.gov; Energy Efficiency -- see the DOE EnergyStar Program at www.energystar.gov.

## **Selecting a Trained Professional Home Inspector**

Seek referrals from friends, neighbors, other buyers, realtors, as well as local listings from licensing authorities and local advertisements. In addition, consult the American Society of Home Inspectors (ASHI) on the web at: <a href="https://www.ashi.org">www.ashi.org</a> or by telephone at: 1-800-743-2744.

|                                     |                                     | a home inspection, it is best to do so as soon a pice whether to get a home inspection. A home |          |
|-------------------------------------|-------------------------------------|--|----------|
|                                     | e lender may not perform a hom      | ne inspection and neither FHA not the lender ma  |          |
| (Signed) Homebuyer                  | <br>Date                            | (Signed) Homebuyer   | <br>Date |
| l acknowledge my electronic signatu | re and give permission for it to be | in place of my written signature.  |          |

Public reporting burden for this collection is estimated at an average of 30 minutes to review the instructions, find the information, and complete this form. This agency cannot conduct or sponsor a collection of information unless a valid OMB number is displayed. You are not required to respond to a collection of information if this number is not displayed. Valid OMB numbers can be located on the OMB Internet page at http://www.whitehouse.gov/library/omb/OMBINVC.html - HUD If desired you can call 1-800-827-1000 to get information on where to send comments or suggestions about this form.



## CFPB FINANCIAL WELL-BEING SCALE Questionnaire

NAME OR NUMBER

| Part 1: How well does this statement describe yo | ou or your situation? |
|--|-----------------------|
|--|-----------------------|

| This statement describes me   | Completely | Very well | Somewhat  | Very little | Not at all |
|---|------------|-----------|-----------|-------------|------------|
| I could handle a major unexpected expense   |            |           |           |             |            |
| 2. I am securing my financial future  |            |           |           |             |            |
| 3. Because of my money situation, I feel like I will never have the things I want in life   |            |           |           |             |            |
| 4. I can enjoy life because of the way I'm managing my money  |            |           |           |             |            |
| 5. I am just getting by financially   |            |           |           |             |            |
| 6. I am concerned that the money I have or will save won't last   |            |           |           |             |            |
| <ul><li>This statement applies to me</li><li>7. Giving a gift for a wedding, birthday or other occasion would put a strain on my finances</li></ul> | Always     | Often     | Sometimes | Rarely      | Never      |
| occasion would but a strain on my linances  |            |           |           |             |            |
| for the month   |            |           |           |             |            |
| ,   |            |           |           |             |            |
| for the month   |            |           |           |             |            |
| for the month  8. I have money left over at the end of the month  |            |           |           |             |            |
| for the month  8. I have money left over at the end of the month  9. I am behind with my finances   |            |           |           |             |            |
| for the month  8. I have money left over at the end of the month  9. I am behind with my finances  10. My finances control my life                  |            | 62+       |           |             |            |