



HOMEOWNERSHIP

DOCUMENT CHECKLIST

ONE-ON-ONE COUNSELING DOCUMENT CHECKLIST:

- ___ PROOF OF INCOME (ONE MONTH'S WORTH OF PAYSTUBS – 2 IF PAID TWICE A MONTH AND 4 IF PAID WEEKLY, MUST BE CONSECUTIVE)
- ___ DOCUMENTATION OF OTHER INCOME (CHILD SUPPORT, DISABILITY, RETIREMENT, RENTAL)
- ___ MOST RECENT UTILITY BILL
- ___ TWO MONTHS OF BANK STATEMENTS (MOST RECENT)
- ___ LAST 2 YEAR'S TAX RETURNS (ALL PAGES, 3 YEARS IF SELF-EMPLOYED)
- ___ COPY OF CREDIT REPORT OR SCORE, IF AVAILABLE
- ___ PRE-APPROVAL, IF AVAILABLE

THE ABOVE DOCUMENTS MUST BE SUBMITTED PRIOR TO YOUR ONE-ON-ONE COUNSELING APPOINTMENT BUT WILL NOT BE ACCEPTED AT THE HOMEBUYER WORKSHOP. PLEASE BRING YOUR COMPLETED INTAKE PACKET (PAGES 2-11) TO THE WORKSHOP.

PLEASE FILL OUT THE INTAKE PACKET USING ADOBE READER OR BY HAND. DO NOT USE APPLE PREVIEW FOR MAC. IF YOU HAVE ANY QUESTIONS REGARDING THE INTAKE PACKET OR REQUIRED DOCUMENTATION, PLEASE CONTACT OUR COUNSELING COORDINATOR AT 410-366-8550 EXT. 249.

PLEASE SEND THE PACKAGE TO ST. AMBROSE:

ATTENTION: HOUSING COUNSELING INTAKE

FAX: (410)366-8795

EMAIL: INTAKE@STAMBROS.ORG

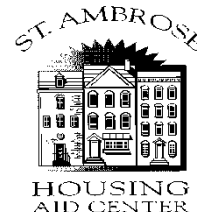
OR

DROP YOUR DOCUMENTS OFF AT 321 E. 25TH STREET BALTIMORE, MD 21218

HOMEOWNERSHIP COUNSELING

INTAKE FORM

PLEASE COMPLETE AND RETURN



Date _____

APPLICANT

Name (first, middle initial and last name): _____

Address (number and street address): _____

City: _____ State: _____ Zip code: _____

County of Residence: Baltimore City _____ Baltimore County _____ Other: _____

Home phone number: _____ Cell phone number: _____

Work phone number: _____ Email: _____

Preferred Method to Communicate: _____

Date of birth (MM/DD/YY): _____ Gender: Male _____ Female _____ Other/non-conforming _____

Are you English Proficient? _____ Yes _____ No

If no, what language do you speak? _____

Ethnicity (check one): _____ Hispanic _____ Non-Hispanic

Race (check one):

_____ Black or African American

_____ White

_____ Black/African American & White

_____ Asian

_____ Asian & White

_____ American Indian/Alaskan Native

_____ Native Hawaiian/Other Pacific Islander

_____ American Indian/Alaskan Native & White

_____ American Indian/Alaskan Native & Black/African American

_____ Other Multi-Racial

Are you foreign born? _____ Yes _____ No

Are you Active Military? _____ Yes _____ No

Are you a veteran? _____ Yes _____ No

Are you Disabled? _____ Yes _____ No

Do you have a Disabled Dependent? _____ Yes _____ No

What is the highest level of education you completed?

_____ College

_____ None

_____ Graduate School

_____ Other

_____ High School/GED

_____ Primary

_____ Junior College

_____ Unknown

_____ Junior High School

_____ Vocational

St. Ambrose Housing Aid Center 321 E.25th Street Baltimore, MD 21218

Phone: 410-366-8550 Fax 410-366-8795

www.stambros.org

CO-APPLICANT

Name (first, middle initial and last name): _____

Address (if different from above): _____

City: _____ **State:** _____ **Zip Code:** _____

Home phone number: _____ **Cell phone number:** _____

Work phone number: _____ **Email:** _____

Preferred Method to Communicate: _____

Date of birth (MM/DD/YY): _____ **Gender:** Male ___ Female ___ Other/non-conforming ___

Are you English Proficient? ___ Yes ___ No

If no, what language do you speak? _____

Ethnicity (check one): ___ Hispanic ___ Non-Hispanic

HOUSEHOLD INFORMATION

Number of people in your household: _____ **Number of children** (under the age of 18): _____

Ages of Dependents: _____

Gross Annual Household Income: _____ **Are you the head of your household?** ___ Yes ___ No

Please (check one): ___ Married ___ Separated ___ Unmarried (single, divorced or widowed)

Household Type (*please check the most accurate*):

- 1. Female headed single parent household
- 2. Male headed single parent household
- 3. Single adult
- 4. Two or more unrelated adults
- 5. Married with children
- 6. Married without children
- 7. Other

Are there non-dependents who will be living in the home? Yes No

If yes, please list below:

Relationship Age

Relationship Age

Referred to by (*please circle all that apply*): _____

- Print Advertisement
- Bank
- Government
- TV
- Realtor
- Staff/Board member
- Walk-In
- Friend
- Radio
- Newspaper Article

**HOMEOWNERSHIP COUNSELING
PROGRAM DISCLOSURE FORM**



PLEASE READ, SIGN AND RETURN

NOTE: If you have an impairment, disability, language barrier, or otherwise require an alternative means of completing this form or accessing information about housing counseling, please talk to your housing counselor about arranging alternative accommodations.

About Us and Program Purpose: St. Ambrose Housing Aid Center, Inc. (St. Ambrose) is a nonprofit, an affordable housing developer, and HUD-certified comprehensive housing counseling agency. Our housing counseling program provides education workshops and a full spectrum of housing counseling including:

- Pre-purchase counseling
- Pre-purchase homebuyer education workshops
- Mortgage delinquency and default resolution counseling
- Resolving and preventing mortgage delinquency workshops

We serve all clients regardless of income, race, color, religion/creed, sex, national origin, age, family status, disability, or sexual orientation/gender identity. We administer our programs in conformity with local, state, and federal anti-discrimination laws, including the federal Fair Housing Act (42 USC 3600, et seq.).

Privacy Policy: St. Ambrose Housing Aid Center, Inc. respects the privacy of its clients and seeks to maintain their personal and financial information as confidential. All records dealing with specific client information is treated as confidential. Confidential information includes client's name, address, phone number, and email address. However, statistical material that does not identify with any individual or family is not classified as confidential. Statistical information includes service provided by the agency, race, gender, income, education, household size, age, and military status. This statistical data is compiled without the use of confidential information and shared with funders, board members, and government agencies to help improve program performance.

_____ _____ Initials

Privacy Policy: I/we acknowledge that I/we received a copy of St. Ambrose's Privacy Policy.

Agency Relationships: St. Ambrose has financial affiliations with HUD, NeighborWorks® America, Housing Partnership Network, City of Baltimore, Baltimore County, State of Maryland, Maryland Legal Services Corporation, Private Foundations and Financial Institutions.

Agency Conduct: No St. Ambrose employee, officer, director, contractor, volunteer, or agent shall undertake any action that might result in, or create the appearance of, administering counseling operations for personal or private gain, provide preferential treatment for any person or organization, or engage in conduct that will compromise our agency's compliance with federal regulations and our commitment to serving the best interests of our clients.

Alternative Services, Programs, and Products & Client Freedom of Choice: St. Ambrose has a housing development program, however, you are not obligated to participate in this or other St. Ambrose programs and services while you are receiving housing counseling from our agency. You are entitled to choose whatever real estate developer, real estate professionals, lenders, and lending products that best meet your needs.

Referrals and Community Resources: You will be provided a community resource list which outlines the county and regional services available to meet a variety of needs, including utilities assistance, emergency shelter, transitional housing, food banks, and legal aid assistance. This list also identifies alternative agencies that provide services, programs, or products identical to those offered by St. Ambrose and its exclusive partners and affiliates.

_____ _____ Initials

I/we understand that I/we are not obligated to use the products and services of St. Ambrose or its industry partners.

Errors and Omissions and Disclaimer of Liability: I/we agree St. Ambrose, its employees, agents, and directors are not liable for any claims and causes of action arising from errors or omissions by such parties, or related to my participation in St. Ambrose counseling; and I hereby release and waive all claims of action against St. Ambrose and its affiliates. I have read this document, understand that I have given up substantial rights by signing it, and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law. If any provision of this document is unenforceable, it shall be modified to the extent necessary to make the provision valid and binding, and the remainder of this document shall remain enforceable to the full extent allowed by law.

Quality Assurance: In order to assess client satisfaction and in compliance with grant funding requirements, St. Ambrose, or one of its partners, may contact you during or after the completion of your housing counseling service. You may be requested to complete a survey asking you to evaluate your client experience. Your survey data may be confidentially shared with St. Ambrose grantors such as HUD or NeighborWorks® America.

I/we acknowledge that I/we received, reviewed, and agree to St. Ambrose’s Program Disclosures.

Customer Signature

Date

Customer Signature

Date

Housing Counselor Signature

Date

FY 2020 HUD Income Limits

Income Limits Effective: April 2020
 State: Maryland
 County: Baltimore City and surrounding Counties Area
 Median Family Income: \$104,000
 Source: U. S. Department of Housing and Urban Development



In determining the appropriate income range for your family/household, select the nearest gross income below that is anticipated to be received during the coming 12 month period. **Please check the box below that accurately indicates the annual (gross) income range of your household.**

Number of Family/Household Members →	1 Person	2 Persons	3 Persons	4 Persons	5 Persons	6 Persons	7 Persons	8 Persons
Over 80%	\$54,951 or above	\$62,801 or above	\$70,651 or above	\$78,500 or above	\$84,801 or above	\$91,101 or above	\$97,351 or above	\$103,651 or above
50%-80% of median (low/moderate income)	\$36,401-\$54,950	\$41,601-\$62,800	\$46,801-\$70,650	\$52,001-\$78,500	\$56,201-\$84,800	\$60,351-\$91,100	\$64,501-\$97,350	\$68,651-\$103,650
30%-50% of median (low/moderate income)	\$21,851-\$36,400	\$25,001-\$41,600	\$28,101-\$46,800	\$31,201-\$52,000	\$33,701-\$56,200	\$36,201-\$60,350	\$39,641-\$64,500	\$44,121-\$68,650
Up to 30% of median (extremely low income)	\$21,850 or below	\$25,000 or below	\$28,100 or below	\$31,200 or below	\$33,700 or below	\$36,200 or below	\$39,640 or below	\$44,120 or below

I hereby certify that the above information provided is my current annual family/household income. (remember to check the appropriate box) The income above is subject to verification and the Federal False Claims Act, 31 U.S.C. §3729 et. seq.

 Client's Name (Please Print)

 Client's Name (Please Print)

 Client's Signature

 Date

 Client's Signature

 Date

For Office Use Only:
 The above information has been reviewed to determine applicant's eligibility for assistance.

Staff name _____ Staff Signature _____ Date _____

Title _____

HOMEOWNERSHIP COUNSELING

**QUESTIONNAIRE
PLEASE COMPLETE AND RETURN**



CUSTOMER EMPLOYMENT — Last 2 Years

Please Print Clearly

Primary Employer: _____

Title Hire Date

Street City State Zip Code

Phone: (_____) _____ - _____

Part-Time or Full-Time (Please Check)

Gross Income (before taxes): \$ _____

Is this amount paid ___ hourly ___ weekly ___ every two weeks ___ twice a month ___ monthly?

Secondary or Previous Employer: _____

Title Hire Date

Street City State Zip Code

Phone: (_____) _____ - _____

Part-Time or Full-Time (Please Check)

Gross Income (before taxes): \$ _____

Is this amount paid ___ hourly ___ weekly ___ every two weeks ___ twice a month ___ monthly?

CO-APPLICANT EMPLOYMENT — Last 2 Years

Primary Employer: _____

Title Hire Date

Street City State Zip Code

Phone: (_____) _____ - _____

Part-Time or Full-Time (Please Check)

Gross Income (before taxes): \$ _____

Is this amount paid ___ hourly ___ weekly ___ every two weeks ___ twice a month ___ monthly?

Secondary or Previous Employer: _____

Title Hire Date

Street City State Zip Code

Phone: (_____) _____ - _____

Part-Time or Full-Time (Please Check)

Gross Income (before taxes): \$ _____ Is this

Is this amount paid ___ hourly ___ weekly ___ every two weeks ___ twice a month ___ monthly?

LIQUID FUNDS/SAVINGS/INVESTMENTS*Please Print Clearly**Please list the approximate value of the following:*

	<i>CUSTOMER</i>	<i>CO-APPLICANT</i>
Checking account	\$	\$
Savings account	\$	\$
Cash	\$	\$
CDs		
Securities (stocks, bonds, etc.)		
Retirement account		
Other Liquid Funds		

Are you about to receive additional funds (e.g., tax refunds, property sales, etc.)? (circle)

Yes No

If yes, how much? \$_____

ADDITIONAL INFORMATION

	<i>CUSTOMER</i>		<i>CO-APPLICANT</i>	
<i>Have you owned a home in the last three (3) years?</i>	<i>Yes</i>	<i>No</i>	<i>Yes</i>	<i>No</i>
<i>Are you a Veteran?</i>	<i>Yes</i>	<i>No</i>	<i>Yes</i>	<i>No</i>
<i>Do you have a contract on a house at this time?</i>	<i>Yes</i>	<i>No</i>	<i>Yes</i>	<i>No</i>
<i>Are you currently working with a real-estate agent?</i>	<i>Yes</i>	<i>No</i>	<i>Yes</i>	<i>No</i>

HOMEOWNERSHIP COUNSELING

CREDIT REPORT AUTHORIZATION

PLEASE COMPLETE AND RETURN



Name: _____
First Middle Last

Spouse: _____
First Middle Last

Address: _____

City State Zip

Social Security Number: _____ - _____ - _____

Spouse Social Security Number (if both named on mortgage): _____ - _____ - _____

Date of Birth: ____/____/____

Spouse Date of Birth (if both named on mortgage): ____/____/____

Please check one of the following and sign below:

_____ I (We) hereby Give permission to pull my (our) credit report for the purposes of my (our) application for assistance in regards to my home or my mortgage loan.

_____ I (We) Do Not Give permission to pull my (our) credit report.

Both signatures required if joint report is requested:

Signature

Date

Signature

Date

ST. AMBROSE HOUSING AID CENTER MONTHLY BUDGET FORM



PLEASE COMPLETE AND RETURN

Monthly Fixed Expenses

Housing Payment	\$ _____
Gas and Electric	\$ _____
Heating/Oil	\$ _____
Water and Sewer	\$ _____
Car Payment	\$ _____
Car Payment	\$ _____
Auto Insurance	\$ _____
*Life Insurance	\$ _____
*Medical Insurance	\$ _____
*Savings	\$ _____
*Investments	\$ _____
*Retirement	\$ _____
Alimony/Child Support	\$ _____
Total	\$ _____

Creditors

Name	Monthly Payment	Total Balance
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
Total	\$ _____	\$ _____

Monthly Flexible Expenses

Groceries	\$ _____
Food away from home	\$ _____
Gas	\$ _____
Transportation costs	\$ _____
Auto Mechanic	\$ _____
Toiletries/Hair Care	\$ _____
Medical (prescriptions)	\$ _____
Day Care/Babysitting	\$ _____
Tuition/Education	\$ _____
Cable/Phone/Internet	\$ _____
Dry Cleaning	\$ _____
Cigarettes/Alcohol	\$ _____
Lottery	\$ _____
Clothing/Personal items	\$ _____
Church/Charity	\$ _____
Cost for children	\$ _____
Cell Phone	\$ _____
Other _____	\$ _____
Other _____	\$ _____
Total	\$ _____

Monthly Net Income

	Borrower 1	Borrower 2
Salary	_____	_____
Alimony/Child Support	_____	_____
Rental Income	_____	_____
Social Security	_____	_____
Pension Income	_____	_____
Public Assistance	_____	_____
Self-employment income	_____	_____
Dependent SSI	_____	_____
Disability Income	_____	_____
Other	_____	_____
Total	_____	_____

Surplus/Deficit

Total Living Expenses (fixed and flexible)	_____
Total Credit Expenses	_____
Total Expenses	_____
Total Net Income:	_____
Surplus or Deficit	_____
(Subtract Total Expenses from Total Net Income)	

***These items should be listed when they are not taken out of your pay checks.**

HOMEOWNERSHIP COUNSELING

HOME INSPECTION SIGNATURE PAGE

PLEASE READ, COMPLETE AND RETURN



I/We received a copy of “For Your Protection Get A Home Inspection” (HUD Form 92564) and “TEN Important Question to Ask A Home Inspector.” (pages 12-14)

I/We understand that any intentional or negligent representation(s) of the information contained on this form may result in civil liability and/or criminal liability under the provisions of Title 18, United States Code, Section 1001.

Customer Signature

Date

Customer Signature

Date

Ten Important Questions to Ask Your Home Inspector

1. What does your inspection cover?

The inspector should ensure that their inspection and inspection report will meet all applicable requirements in your state if applicable and will comply with a well-recognized standard of practice and code of ethics. You should be able to request and see a copy of these items ahead of time and ask any questions you may have. If there are any areas you want to make sure are inspected, be sure to identify them upfront.

2. How long have you been practicing in the home inspection profession and how many inspections have you completed?

The inspector should be able to provide his or her history in the profession and perhaps even a few names as referrals. Newer inspectors can be very qualified, and many work with a partner or have access to more experienced inspectors to assist them in the inspection.

3. Are you specifically experienced in residential inspection?

Related experience in construction or engineering is helpful, but is no substitute for training and experience in the unique discipline of home inspection. If the inspection is for a commercial property, then this should be asked about as well.

4. Do you offer to do repairs or improvements based on the inspection?

Some inspector associations and state regulations allow the inspector to perform repair work on problems uncovered in the inspection. Other associations and regulations strictly forbid this as a conflict of interest.

5. How long will the inspection take?

The average on-site inspection time for a single inspector is two to three hours for a typical single-family house; anything significantly less may not be enough time to perform a thorough inspection. Additional inspectors may be brought in for very large properties and buildings.

6. How much will it cost?

Costs vary dramatically, depending on the region, size and age of the house, scope of services and other factors. A typical range might be \$300-\$500, but consider the value of the home inspection in terms of the investment being made. Cost does not necessarily reflect quality. HUD Does not regulate home inspection fees.

7. What type of inspection report do you provide and how long will it take to receive the report?

Ask to see samples and determine whether or not you can understand the inspector's reporting style and if the time parameters fulfill your needs. Most inspectors provide their full report within 24 hours of the inspection.

8. Will I be able to attend the inspection?

This is a valuable educational opportunity, and an inspector's refusal to allow this should raise a red flag. Never pass up this opportunity to see your prospective home through the eyes of an expert.

9. Do you maintain membership in a professional home inspector association?

There are many state and national associations for home inspectors. Request to see their membership ID, and perform whatever due diligence you deem appropriate.

10. Do you participate in continuing education programs to keep your expertise up to date?

One can never know it all, and the inspector's commitment to continuing education is a good measure of his or her professionalism and service to the consumer. This is especially important in cases where the home is much older or includes unique elements requiring additional or updated training.

For Your Protection: Get a Home Inspection

Name of Buyer

Property Address

What the FHA Does for Buyers...and What We Don't Do

What we do: FHA helps people become homeowners by insuring mortgages for lenders. This allows lenders to offer mortgages to first-time buyers and others who may not qualify for conventional loans. Because the FHA insures the loan for the lender, the buyer pays only a very low down-payment.

What we don't do: FHA does not guarantee the value or condition of your potential new home. If you find problems with your new home after closing, we cannot give or lend you money for repairs, and we cannot buy the home back from you. That's why it's so important for you, the buyer, to get an independent home inspection. Ask a qualified home inspector to inspect your potential new home and give you the information you need to make a wise decision.

Appraisals and Home Inspections are Different

As part of our job insuring the loan, we require that the lender conduct an FHA appraisal. An appraisal is different from a home inspection. Appraisals are for lenders; home inspections are for buyers. The lender does an appraisal for three reasons:

- to estimate the value of a house
- to make sure that the house meets FHA minimum property standards
- to make sure that the house is marketable

Appraisals are not home inspections.

Why a Buyer Needs a Home Inspection

A home inspection gives the buyer more detailed information than an appraisal--information you need to make a wise decision. In a home inspection, a qualified inspector takes an in-depth, unbiased look at your potential new home to:

- evaluate the physical condition: structure, construction, and mechanical systems
- identify items that need to be repaired or replaced
- estimate the remaining useful life of the major systems, equipment, structure, and finishes

What Goes into a Home Inspection?

A home inspection gives the buyer an impartial, physical evaluation of the overall condition of the home and items that need to be repaired or replaced. The inspection gives a detailed report on the condition of the structural components, exterior, roofing, plumbing, electrical, heating, insulation and ventilation, air conditioning, and interiors.

Be an Informed Buyer

It is your responsibility to be an informed buyer. Be sure that what you buy is satisfactory in every respect. You have the right to carefully examine your potential new home with a qualified home inspector. You may arrange to do so before signing your contract, or may do so after signing the contract as long as your contract states that the sale of the home depends on the inspection.