

# **Programs and Services Division Education and Counseling Programs Application Packet**

Welcome to Visionary Home Builders of California, Inc. (VHB) Homeownership, Rental and Financial Education Center

This application will be used to enroll you in the programs offered by our agency which include:

### Homebuyer Education and Counseling:

 A HUD Approved 8 hour Homebuyers Education Class to assist current and prospective Homebuyers with the necessary information to make educated decisions regarding the purchase of a home.

### • Rental Counseling:

O A program designed to assist participants who are not ready for homeownership but want to become sustainable and knowledgeable renters in understanding the intake screening process, required deposits, credit report and alternative to credit report requirements, tenant and landlord responsibilities and fair housing.

### • Financial Capability/Education:

 A workshop providing participants information on how to create a spending plan/ budget, building & maintaining credit, paying down debts and creating savings goals.

Please fill out the application related to the program you have chosen & return it to our office. If a question does not apply to you, please mark N/A (Not Applicable). If you have any questions please contact us at:

315 N. San Joaquin Street, Stockton, CA 95202 Phone: (209) 466-6811 Fax: (209) 466-3465 www.visionaryhomebuilders.org

## Please Note: We Cannot Accept Original Documents. Bring copies of the required documents and Completed Pages per program applied for as listed below: Application: Part 1, 2, 3, 4 and 5 Please Note: In Part 2; place an "x" in the $\square$ next to the program you seeking services for. Net Income: Spending Plan/Budget (Monthly) Disclosure Forms: 1 & 2 Authorization Forms: 1 & 2 Driver's License/Identification Card (Photo ID) Social Security Card Last 3 Months: Work Paystubs Last 3 Months: Checking and Savings Account Statements Last 3 Months: Retirement and Investment Account Statements Last 3 Years: Federal Tax Returns including all W2's and 1099's If applicable: Final Bankruptcy Discharge Papers Final Foreclosure Notice If you have seen a lender, bring your loan application (1003), Loan Cost Illustration (Good Faith Estimate) and pre-approval letter Fees: Class/Workshop Fee: \$50.00 per person Credit Report Fee: \$23.05 per person The funds must be in the form of a Money Order or Cashier's Check made payable to: Visionary Home Builders of California, Inc. Personal Checks and Cash ARE NOT ACCEPTED

### **Applicant Information**

First Name:	Middle Name:
Last Name:	-
Head of Household:	□ Yes □ No
	:
Driver's License/ID #:	
Date of Birth:/_	/
Mobile Phone: (	
Home Phone: ()	
Email:	
Home Address:	
City: State:	Zip code:
Is your mailing address t	
	esidence:
Housing Payment:	
Household Size:	# Dependents:
Ages:	
<b>Employment &amp; Income</b>	e Information: (2 Years)
Current Employer:	
Position/Title:	
Phone: ()	_ Hire Date://
Monthly Income: Gross:	\$ Net: \$
Previous Employer:	
Position/Title:	
Phone: ()	_ Hire Date://
Monthly Income: Gross:	\$ Net: \$
Previous Employer:	<del></del>
Position/Title:	
Phone: ()	_ Hire Date://
Monthly Income: Gross:	\$ Net: \$
	e:
Monthly Amount: \$	

### **Co-Applicant Information**

Relationship to Applicant:
First Name: Middle Name:
Last Name:
Head of Household: $\Box$ Yes $\Box$ No
Social Security Number:
Driver's License/ID #:
Date of Birth:/
Mobile Phone: (
Home Phone: (
Email:
Home Address:
City: State: Zip code:
Is your mailing address the same? $\square$ Yes $\square$ No
Years living at current residence:
Housing Payment:
Household Size:# Dependents:
Ages:
Employment & Income Information: (2 Years)  Current Employer:  Position/Title:
Current Employer: Position/Title:
Current Employer:
Current Employer:  Position/Title:  Phone: () Hire Date:/ _/_  Monthly Income: Gross: \$ Net: \$  Previous Employer:  Position/Title:  Phone: () Hire Date:/ _/_  Monthly Income: Gross: \$ Net: \$
Current Employer:  Position/Title:  Phone: ( Hire Date:/  Monthly Income: Gross: \$ Net: \$  Previous Employer:  Position/Title:  Phone: ( Hire Date:/  Monthly Income: Gross: \$ Net: \$  Previous Employer:  Previous Employer:
Current Employer:  Position/Title:  Phone: () Hire Date:/ _/  Monthly Income: Gross: \$ Net: \$  Previous Employer:  Position/Title:  Phone: () Hire Date:/ _/  Monthly Income: Gross: \$ Net: \$  Previous Employer:  Previous Employer:  Position/Title:
Current Employer:  Position/Title:  Phone: () Hire Date:/_/  Monthly Income: Gross: \$ Net: \$  Previous Employer:  Position/Title:  Phone: () Hire Date:/_/  Monthly Income: Gross: \$ Net: \$  Previous Employer:  Position/Title:  Phone: () Hire Date:/_/
Current Employer:  Position/Title:  Phone: () Hire Date:/ _/  Monthly Income: Gross: \$ Net: \$  Previous Employer:  Position/Title:  Phone: () Hire Date:/ _/  Monthly Income: Gross: \$ Net: \$  Previous Employer:  Previous Employer:  Position/Title:
Current Employer:  Position/Title:  Phone: (
Current Employer:  Position/Title:  Phone: () Hire Date:/_/  Monthly Income: Gross: \$ Net: \$  Previous Employer:  Position/Title:  Phone: () Hire Date:/_/  Monthly Income: Gross: \$ Net: \$  Previous Employer:  Position/Title:  Phone: () Hire Date:/_/

# Each Applicant & Co-Applicant must fill out this Form Place an "x" in the $\square$ next to the program you seeking services for

<ul><li>☐ Homebuyer Education Cl</li><li>☐ Financial Capabilities/Ed</li></ul>		□ Rental Co	ounseling
Previous Client: ☐ Yes ☐ No	# of Co-Applic	ants:	
If "No," please explain: First Name:	MI:	Last Name:	
Address:	City: _		State: Zip:
Email Address: Mobile Phone: ()			
Mobile Phone: ()		Work Phone: (	_)
Home Phone: ()		Work Phone: (	_)
			English Proficient: ☐ Yes ☐ No
Referral Source: How did you	hear about Vi	sionary Home Builders	of California, Inc.?
☐ Friend/Relative ☐ Flyer	'/Sign □ Face	book/Social media	☐ Website ☐ Walk-in
☐ Previous Client ☐ HUD	/Government	☐ Non-Profit Agency	□ Lender/Bank
□ Realtor □ News	spaper	$\Box$ TV $\Box$ Radio	☐ Other:
Government N	<b>Ionitoring and</b>	Reporting Demograph	<u>ic Information</u>
• Race:   Asian	☐ American Indi	an/Alaskan Native	☐ Black or African American
□ Native Hawaii	an-Pacific Islande	er 🗆 White 🗆 Hispanic	□ Other Multiple Race
• Ethnicity (optional): ☐ Carr	nbodian   Chine	ese 🗆 Filipino	☐ Hmong ☐ Vietnamese
□ Mexi	can   Puert	o Rican	
• Number in Household: _			
• Live in Rural Area:	$\square$ Yes $\square$ No		
		☐ Other/Non-Conforming	-
• Education: □ College			
<ul> <li>Household Annual Incon</li> </ul>	ne: \$	Current Resid	dence: □ Own □ Rent □ Other
Please check here $\Box$ if ye	ou do not wish to	furnish the information req	quested below; if not, continue:
• <b>Head of Household:</b> □ Ye	s 🗆 No	Foreign Born: ☐ Yes	□ No
• Age:	Birthdate:	/ /	
• Are you Disabled?	□ Yes □ No	Are you a Disabled Dep	endent?   Yes   No
• Marital Status:	☐ Married	☐ Single ☐ Othe	
• Active Military:	□ Yes □ No	Are you a Veteran:	Yes 🗆 No
• First Time Home Buyer:	□ Yes □ No	First Generation Hon	ne Buyer: □ Yes □ No
E			EQUAL HOUSING OPPORTUNITY

	Asset Inf	<u>formation</u>	
Have you owned real estate pr	operty in the last	three (3) years? ☐ Yes ☐ No	
Have you had a bankruptcy?	$\square$ Yes $\square$ No	If "Yes" Date:	
Have you had a foreclosure?	□ Yes □ No	If "Yes" Date:	
Ž			
Name of Bank/Institution	Balance	Name of Bank/Institution	Balance
Name of Bank/Institution  Cash:			Balance \$\$
Name of Bank/Institution  Cash: Checking: Checking:	Balance	Name of Bank/Institution CD's:	<b>Balance</b> \$ \$ \$
Name of Bank/Institution  Cash: Checking:	Balance	Name of Bank/Institution  CD's: Stocks/Bonds:	<b>Balance</b> \$_ \$_ \$_ \$_ \$_ \$_

### **Liability Information**

Name of Lender/Creditor	Monthly Payment	Balance
1.	\$	\$
2.	\$	\$
3.	\$	\$
4.	\$	\$
5.	\$	\$
6.	\$	\$
7.	\$	\$
8.	\$	\$
9.	\$	\$
10.	\$	\$
11.	\$	\$
12.	\$	\$

	<b>Declaration Page</b>		
1.	Are there any outstanding judgments against you?	□Yes	□ No
2.	Have you been declared bankrupt within the past 7 years?	$\square$ Yes	$\square$ No
3.	Have you had property foreclosed upon or given title or deed		
	in lieu thereof in the last 7 years?	$\square$ Yes	$\square$ No
4.	Are you a party to a lawsuit?	□Yes	$\square$ No
5.	Have you directly or indirectly been obligated on any loan		
	which resulted in foreclosure, transfer of title in lieu of		
	foreclosure, or judgment? (This includes loans for: home mortgage	·,	
	SBA, home improvement, educational, & manufactured mobile home).	. □ Yes	$\square$ No
6.	Are you presently delinquent or in default on any Federal		
	debt or any other loan, mortgage, financial obligation, bond,		
	or loan guarantee?	$\square$ Yes	$\square$ No
7.	Are you obligated to pay alimony, child support, or separate		
	maintenance?	$\square$ Yes	$\square$ No
8.	Is any part of the down payment borrowed?	□Yes	$\square$ No
9.	Are you a co-maker or endorser on a note?	□ Yes	$\square$ No
If you	answered "Yes" to any questions 1 through 9, please attach Separate Sh name, and address of Lender, FHA or VA case number, and re		
10	. Are you an immigrant to the U.S./Foreign Born?	□ Yes	$\square$ No
	o If "Yes", Year of Immigration:		
11	. Will you occupy the property as your primary residence?	$\square$ Yes	$\square$ No
	o If "Yes," Have you had an ownership interest in a		
	Property in the last three years?	$\square$ Yes	$\square$ No
	o If "Yes": What type of property did you own? (See	options be	elow):
		_	elow): nt Property
		Investme	nt Property
	☐ Principal Residence ☐ Second Home	Investme	nt Property elow):
	☐ Principal Residence ☐ Second Home ☐ o If "Yes": How did you hold title to the home? (See	Investme	nt Property elow):
Applica	☐ Principal Residence ☐ Second Home ☐ o If "Yes": How did you hold title to the home? (See	☐ Investme c options be de ☐ Joint	nt Property elow):
	☐ Principal Residence ☐ Second Home ☐ O If "Yes": How did you hold title to the home? (See ☐ Solely by yourself ☐ Jointly with Spouse	☐ Investme e options be e ☐ Joint  Signature	nt Property elow):
Applica	□ Principal Residence □ Second Home □  ○ If "Yes": How did you hold title to the home? (See  □ Solely by yourself □ Jointly with Spouse  ant Signature	☐ Investme e options be e ☐ Joint  ☐ Signature  ☐ Name	nt Property elow):

### **Authorization**

By signing below, I/we certify that the above is true and correct and authorize Visionary Home Builders of California, Inc. to:

- Pull my/our credit report to review my/our credit report.
- Verify all information contained herein.
- Obtain a copy of the HUD-1 settlement statement from the mortgage lender or Title Company that I/we utilize for my/our mortgage loan.

I/we understand that willful concealment of information regarding family size, income, assets, holdings, personal or real property, business or partnerships, royalties, child support, debt repayment or other eligibility criteria will result in immediate disqualification from any Visionary Home Builders of California, Inc. program(s) from which I/we have submitted information and may result in civil and/or criminal recourse through the legal system.

Applicant Signature	Co-Applicant Signature
Applicant Name	Co-Applicant Name
Date:	Date:
Authorized Staff - Signature and Name	Date:

# **Net Income: Spending Plan/Budget (Monthly)**

Rent/Housing:	
Rent /1 <sup>st</sup> Mortgage (Principal & Interest)	\$
Monthly Property Taxes	
Renters/Homeowners Insurance	\$
2 <sup>nd</sup> Mortgage (If Applicable)	\$
Loans:	Ψ
Car Loan(s)	\$
Student Loan(s)	\$
Credit Card: 1 (minimum payment)	\$ \$ \$ \$
Credit Card: 2 (minimum payment)	\$
Credit Card: 3 (minimum payment)	\$
Credit Card: 4 (minimum payment)	\$
<b>Education:</b>	
School Fees/Books/Supplies	\$
School Lunches	\$
Tuition	
Tuition	\$
<b>Utilities:</b>	
Electricity & Gas	\$
Garbage/Trash	\$
Water/Sewer	\$
Telephone(s)/Mobile	\$
Food:	
Food/Groceries	\$
Food at Work	\$
Insurance:	Φ.
Life Insurance	\$
Pet Insurance	\$
Medical/Health:	Ф
Doctor/Dentist Visit-Copay	\$
Medications	\$
Health Insurance	\$
Home Maintenance:	¢
Cleaning Supplies Lawn Care/Maintenance	\$ \$
	· ·
Monthly Maintenance Allotment Pest Control	\$
Auto:	φ
Auto Insurance	\$
	\$
Car Repairs/Smog/Inspection Fuel: Gasoline/Diesel	\$
Annual Registration/Tags	\$

Entertainment:	
Athletic Events/Hobbies	\$
Cable TV	\$
Internet	
Dining Out	\$ \$ \$
Movie Rentals	\$
Newspaper/Magazines	\$
Vacations	\$
Gifts/Donations:	
Christmas	\$
Church Donation	\$
Other Gifts/Donations	\$
Other:	
Birthday Gifts	\$
Checking Account Fee	\$
Pet Food/Expenses	\$
Veterinary Visits	\$
Misc./Spending Money	\$
Personal:	
Allowances	\$
Barber/Beauty Shop	\$
Child Care	\$ \$ \$ \$ \$
Child Support	\$
Alimony	\$
Personal Items	\$
Child Sports	\$
Other	\$
Savings:	
Emergency Fund	\$
Other Savings	\$
Clothing:	
Clothing/Shoes	\$
Laundry/Dry Cleaning	\$
Other:	
	\$
	\$
	\$
Summary:	
Total Net Income:	\$
Total Expenses:	\$
Surplus/Shortfall:	\$

Applicant - Signature and Name:	Date:
Co-Applicant - Signature and Name:	Date:

# **Disclosure Form: 1**

# **Conflict of Interest Programs Disclosure Statement**

I/We,	, have been advised that Visionary
Home Builders of California, Inc. (	(VHB) provides the following services:
<ul> <li>Education Class to assist of to make educated decisions</li> <li>Rental Counseling: A prohomeownership but want to the intake screening process requirements, tenant and laterate a spending plan/bud savings goals.</li> <li>Multi-FamilyAffordable moderate-income families.</li> <li>Real Estate Agency: Real property.</li> </ul>	ing and Education: A HUD Approved 8 hour Homebuyers urrent and prospective Homebuyers with the necessary information is regarding the purchase of a home. In gram designed to assist participants who are not ready for so become sustainable and knowledgeable renters in understanding its, required deposits, credit report and alternative to credit report andlord responsibilities and fair housing.  In the interval of
Community Bank, Bank of Americ Citibank, F&M Bank, Oak Valley Development Fund and Wells Farg	has financial relationships with industry partners including: BAC ca, BBVA, Bank of Stockton, Bank of the West, JPMorgan Chase, Community Bank, Ocwen, Union Bank, U.S. Bancorp, Raza go. I/We further acknowledge that VHB has program participation, oment agreements with various governmental agencies including
any way to receive, purchase, or whome from VHB, to utilize productions	ee that the services I/we receive from VHB <b>do not obligate me in</b> tilize any other services offered by VHB, to purchase or rent a ts or services of any of VHB's industry partners or any other participate in any program of any governmental agencies.
Applicant Signature	Co-Applicant Signature
Applicant Name	Co-Applicant Name

Date: \_\_\_\_\_

Date: \_\_\_\_\_

## **Disclosure Form: 2**

### **Counseling Program Disclosure**

Purpose of Counseling: I/We understand that the purpose of the counseling and program is to provide one-on-one counseling to help participants repair problems that may prevent affordable mortgage financing. The counselor will analyze my/our financial and credit situation, identify those barriers preventing me/us from obtaining affordable mortgage financing, and develop a plan to remove those barriers. The counselor will also provide assistance in debt-load management with the preparation of a monthly and manageable budget plan. I/We further understand that it will not be the responsibility of the counselor to repair the problem for me/us but rather to provide guidance and education to empower me/us in fixing those issues preventing affordable mortgage financing. I/We understand that even if we follow the plan and remove the barriers I/we may still not obtain mortgage financing.

**Eligible Criteria:** I/We understand that the counseling agency provides housing counseling assistance to customers whose problems can be resolved in 24 months or less. I/We understand that if it is determined my/our issues will take longer than 24 months to fix, I/we will be referred to a long-term housing counseling program.

<u>Homeownership Education Classes:</u> I/We understand that as part of the housing counseling program, I/we will be required to attend group homeownership education classes.

Hold Harmless Agreement: In consideration of the counseling services provided by Visionary Home Builders of California, Inc. I/we agree to release, discharge, and hold Visionary Home Builders of California, Inc. and their respective employees and volunteers, (the "Indemnified Parties"), harmless from any liability, damages, claim, suit, action, or demand asserted against or incurred by me/us as a result of services which I/we receive from the Indemnified Parties.

<u>Customer's Responsibility:</u> I/We understand that it is our responsibility to work in conjunction with the counseling process and that failure to cooperate will result in the discontinuation of my counseling program. This includes but is not limited to missing three consecutive appointments.

Applicant Signature	Co-Applicant Signature
Applicant Name	Co-Applicant Name
Date:	Date:
Authorized Staff - Signature and Name	

### **Authorization Form: 1**

#### **Client Authorization for Release of Information**

I/We agree to participate in counseling sessions to help me/us with my/our present housing situation and or to provide a roadmap of ways to make better money management decisions. I/we understand that counselors and sales staff may obtain and discuss information on my/our credit history, banking financial situations, employment, or other related subjects which may improve my/our ability and chances to purchase/acquire a home. Additionally, I/we understand that this is necessary to create a spending plan/budget, build & maintain credit, pay down debts and create savings goals. I/we understand that all information will be held in confidence and that no information will be divulged to any person who is not directly involved in the counseling or homeownership process.

I/we understand that I/we am/are free to choose any loan product or house, regardless of the loan products shown to me/us or homes built by Visionary Home Builders of California, Inc.

I/we authorize Visionary Home Builders of California, Inc. to share credit, financial, employment and other information with other non-profits, governmental agencies, or lending institutions as may be necessary to help facilitate homeownership or other housing alternative(s).

As the undersigned, I/we have applied for mortgage counseling. As such I/we give permission to Visionary Homebuilders of California, Inc. to obtain our credit history.

Hold Harmless Agreement: In consideration of the counseling services provided by Visionary Home Builders of California, Inc. I/We agree to release, discharge, and hold Visionary Home Builders of California, Inc. and their respective employees and volunteers, (the "Indemnified Parties"), harmless from any liability, damages, claim, suit, action, or demand asserted against or incurred by me/us as a result of the disclosure of my/our information so long as the Indemnified Parties have used reasonable efforts to keep it confidential.

Applicant Signature	Co-Applicant Signature	_
Applicant Name	Co-Applicant Name	_
Social Security Number	Social Security Number	
Date:	Date:	
Authorized Staff - Signature and Name		

## **Authorization Form: 2**

### **Information Disclosure Authorization**

I/We hereby authorize you to release to Visionary Home Builders of California, Inc., or whom it assigns, the following information for the purpose of verification:

- Employment history, dates, titles, hours, income etc.
- Banking and savings accounts of record
- Mortgage loans(s), landlord rating and payoff information
- Any other information deemed necessary in connection with a consumer credit report for transactions which involve real estate.

This information is for the confidential use in compiling a mortgage loan credit file for a VA, FHA or conventional home loan.

A photographic or carbon or faxed copy of this authorization being a valid copy of the signature(s) of the undersigned, may be deemed to be the equivalent of the original and may be used as a duplicate original.

Your prompt reply will help expedite my real estate transaction. Thank you for your cooperation.

Re: Loan #:(If Applicable)	Property Address:
Applicant Signature	Co-Applicant Signature
Applicant Name	Co-Applicant Name
Social Security Number	Social Security Number
Date:	Date:

NOTICE TO BORROWERS: This is notice to you as required by the Right to Financial Privacy Act of 1978 that FHA has a right of access to financial records held by financial institutions in connection with the consideration or administration of assistance to you. Financial records involving your transaction will available to FHA without further notice or authorization but will not be disclosed or released by this institution to another Government Agency or Department without your consent except as required or permitted by law.