



improving opportunity.
empowering our community.

Congratulations for taking the first step and contacting Tejano Center's Affordable Housing Program about **Post-Purchase Counseling**. We will work with you to help meet your housing needs.

To better assist you with the most effective and efficient counseling service, completely fill out the attached Intake Application and submit all the required documents.

Bring one good visible COPY of the following documents:

- Picture ID and Social Security Card
- Last 30 days of ALL Household Income
(Check Stubs, Child Support, Social Security, Disability, Unemployment, Self-Employment Profit/Loss Statements, etc.)
- Last 2 years (2016 & 2015) of Tax Returns and W-2/1099 Forms (complete with all schedules)
- Last 2 months of Bank statements (all pages) for all asset accounts (checking, savings, 401(k), etc.)
- Most recent Mortgage statement (all pages)
- Closing Documents (Closing Disclosure and Mortgage Note)
 - If you purchased before October 2015 we will need the Mortgage Note, Truth in Lending & HUD 1 Settlement Statement.

Based on various options that will be discussed with your housing counselor, additional financial documentation may be required.

Call to set up your counseling appointment. Bring all the required documents in copies the day of your counseling session.

Appointments available Monday thru Friday at:

9:00 A.M. 10:30 A.M. 1:00 P.M. 3:00 P.M.

Counseling Location: 6901 Brownwood Street, Houston, TX 77020

Please arrive 30 minutes before your appointment. If you are not able to attend a counseling session in person call our office to find out more information about our phone counseling sessions.

Thank you,
TCCC Staff

Housing Program
6901 Brownwood Street
Houston, Texas 77020
713.673.1080 Tel.
713.673.1304 Fax

TejanoCenter.org



Affordable Housing Program

6901 Brownwood Street
Houston, TX 77020
PHONE: (713) 673-1080
FAX: (713) 673-1304
EMAIL: housing@tejanocenter.org

Foreclosure Intervention/Post Purchase Counseling Intake

PLEASE PRINT CLEARLY

Which service do you need? Post Purchase Counseling Foreclosure Intervention Counseling

PERSONAL INFORMATION

Primary Borrower Name _____ Date of Birth _____ Social Security # _____

Co-Borrower Name _____ Date of Birth _____ Social Security # _____

Property Address _____ City _____ State _____ ZIP _____

Home Phone (____) _____ - _____ Cell Phone (____) _____ - _____ Work Phone (____) _____ - _____

Email Address: _____

Primary Borrower Gender: Male Female Disabled Head of Household

Co-Borrower Gender: Male Female Disabled Head of Household Relationship to Primary Client _____

Family Type: Single Adult Married without Children Married with Children Divorced Widowed
 Two or more unrelated adults Female Headed Single Parent Male Headed Single Parent Other

Family Size: _____ Language Preference: English Spanish Other: _____

Who referred you to our agency? (Please Circle)

Print Advertisement Bank TV TCCC Staff Radio Realtor Friend Internet Other

If you were referred by a bank or realtor please let us know who? _____

Would you be willing to talk to the media about your story? Yes No

EMPLOYMENT INFORMATION

Primary Borrower's Employer _____ Work Phone (____) _____ - _____

Occupation/Title _____ How Long? _____ yrs. _____ mos. Self Employed

Income \$ _____ Weekly Bi-Weekly Bi-Monthly Monthly Year

Co-Borrower's Employer _____ Work Phone (____) _____ - _____

Occupation/Title _____ How Long? _____ yrs. _____ mos. Self Employed

Income \$ _____ Weekly Bi-Weekly Bi-Monthly Monthly Year

Other Household Income Sources (amount per month)

Bonuses/Commission \$ _____ Child Support \$ _____ Spousal Support \$ _____
SSI \$ _____ Unemployment \$ _____ VA \$ _____ Other \$ _____

Household Current Assets (current balance)

Checking \$ _____ Stocks/Bonds \$ _____ Savings \$ _____
401K \$ _____ CD/Money Market \$ _____ Gift Funds \$ _____
Other \$ _____ Other \$ _____ Other \$ _____

Household Monthly Debt Obligations (minimum amount due per month)

Total Credit Card Payments \$ _____ Student Loans \$ _____
Car Payments \$ _____ Personal Loans \$ _____
Child Support \$ _____ Other _____ \$ _____

MORTGAGE LOAN INFORMATION

Date house was purchase? (month/year) _____ / _____ Original Loan Amount \$ _____
Current Lender or Servicer: _____ Loan Number: _____
Current Interest Rate _____% Fixed Adjustable Type of Mortgage Loan: FHA Conventional VA
Current Loan Balance? \$ _____
Monthly Mortgage Payment \$ _____ Does this include Taxes and Insurance? _____
Have you refinanced? Yes No Do you have a Second Mortgage? Yes No
Are your property taxes current? Yes No Do you have homeowners insurance? Yes No
Are you delinquent on your mortgage? Yes No

If yes, please answer the following questions. If no, skip until page 3.

How many months are you delinquent on your mortgage? _____ Total amount delinquent? \$ _____
Date of last payment _____ Have you had a loan modification on the mortgage loan? Yes No
Is there a Foreclosure Sale date? Yes No If so when? _____
Are you currently in Bankruptcy? Yes No Are you discussing your situation with an attorney? Yes No
Do you want to keep the house? Yes No Any savings to pay the delinquent amount? \$ _____
What are your plans to bring this mortgage loan current? _____

Please circle your answer.

	PRIMARY CLIENT		CO-CLIENT	
Are you a First Time Homebuyer?	Yes	No	Yes	No
Ethnicity:	Hispanic	Non-Hispanic	Hispanic	Non-Hispanic
Race:	American Indian or Alaskan Native		American Indian or Alaskan Native	
	Asian		Asian	
	Black or African American		Black or African American	
	Native Hawaiian or Other Pacific Islander		Native Hawaiian or Other Pacific Islander	
	White		White	
	Other		Other	
	I do not wish to furnish this information		I do not wish to furnish this information	
Do you intend to occupy the property as your primary residence?	Yes	No	Yes	No
Have you owned any property in the past 3 years?	Yes	No	Yes	No
Have you declared bankruptcy within the past 7 years?	Yes	No	Yes	No
Have you had a property been foreclosed on or given title or deed in lieu thereof in the past 7 years?	Yes	No	Yes	No
What is your citizenship?	US Citizen		US Citizen	
	Permanent Resident		Permanent Resident	
	Non-Perm. Resident		Non-Perm. Resident	
Active Military?	Yes	No	Yes	No
Highest Level of Education?	Below High School	High School Diploma	Below High School	High School Diploma
	Two Year College	Bachelor's Degree	Two Year College	Bachelor's Degree
	Master's Degree	Above Master's Degree	Master's Degree	Above Master's Degree

Please list contact persons in case we cannot contact you to leave a message.

Name _____ Phone Number (____) _____ - _____ Relationship to you _____

Name _____ Phone Number (____) _____ - _____ Relationship to you _____

Name _____ Phone Number (____) _____ - _____ Relationship to you _____

Agreement

By signing below, I (we) acknowledge that a copy of this form is as valid as the original. I (we) acknowledge that the information I (we) have provided in this form is true and accurate to the best of my (our) knowledge. This Intake Application and all financial documents submitted will be retained by the Affordable Housing Program of Tejano Center for Community Concerns (counseling agency) even if I (we) do not obtain the result I (we) desired or decide to withdraw from their services.

I (We) understand that this form may be provided to any source deemed necessary to process my (our) homeowner counseling service. The counseling agency also owns and sells real estate; however, I (we) are under no obligation to purchase real estate through this agency.

Authorization to Verify Credit

I (We) hereby authorize the counseling agency to obtain a soft pull credit report from Experian and Transunion thru the agency's partnership with Freddie Mac Loan Prospector Outreach Mortgage Loan Assessment for Housing Professionals. The counseling agency also has my (our) authorization to verify my/our bank accounts, employment, credit history, outstanding debt, including my present or previous mortgages as needed.

Privacy Policy

The Affordable Housing Program at Tejano Center for Community Concerns values your trust and is committed to the responsible management, use and protection of personal information. This notice describes our policy regarding the collection and disclosure of personal information. Personal information, as used in this notice, means information that identifies an individual personally and is not otherwise publicly available information. It includes personal financial information such as credit history, income, employment history, financial assets, bank account information and financial debts. It also includes your social security number and other information that you have provided us on any applications or forms that you have completed. Your personal information will be provided to creditors, program monitors, and others only with your authorizations and signature on the Foreclosure Intervention 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.

Information We Collect

We collect personal information to support our housing counseling and to aid you in the services you desire. We collect personal information about you from the following sources:

- Information that we receive from you orally, on applications or other forms,
- Information about your transactions with us, our affiliates or others,
- Information we receive from a consumer reporting agency, and
- Information that we receive from personal and employment references.

Information We Disclose

We may disclose the following kinds of personal information about you:

- Information we receive from you orally, on applications or other forms, such as your name, address, social security number, employer, occupation, assets, debts and income;
- Information about your transactions with us, our affiliates or others, such as your account balance, payment history and parties to your-transactions; and
- Information we receive from a consumer reporting agency, such as your credit bureau reports, your credit history and your creditworthiness.

To Whom Do We Disclose

We may disclose your personal information to the following types of unaffiliated third parties:

- Financial service providers, such as companies engaged in providing home mortgage or home equity loans,
- Others, such as nonprofit organizations involved in community development, but only for program review, auditing, research and oversight purposes.

We may also disclose personal information about you to third parties as permitted by law.

Prior to sharing personal information with unaffiliated third parties, except as described in this policy, we will give you an opportunity to direct that such information not be disclosed.

Confidentiality and Security

We restrict access to personal information about you to those of our employees who need to know the information to provide services to you and to help them do their jobs aiding you in obtaining housing counseling. We maintain physical and electronic security procedures to safeguard the confidentiality and integrity of personal information in our possession and to guard against unauthorized access. Our safeguards comply with federal regulations to guard your personal information.

Directing Us Not to Make Disclosures to Unaffiliated Third Parties

If you prefer that we not disclose personal information about you to unaffiliated third parties, you may opt out of those disclosures, that is, you may direct us not to make those disclosures (other than disclosures permitted by law). **If you chose to “opt-out” please request the Affordable Housing staff provide you with the Privacy Choices form.** Once you filled out the form please send it back to the Affordable Housing Program office at 6901 Brownwood Street, Houston, TX 77020. Please allow approximately 30 days from our receipt of your Privacy Choices form for it to become effective.

Foreclosure Intervention Counseling Agreement *(only applicable to clients receiving this service)*

I understand that **Tejano Center for Community Concerns** provides foreclosure mitigation counseling after which I will receive a written action plan consisting of recommendations for handling my finances, possible including referrals to other housing agencies as appropriate.

I understand that **Tejano Center for Community Concerns** 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 of their agents or purposes of program monitoring, compliance and evaluation.

I give permission to NFMC program administrators and/or agents to follow-up with me within the next three years for the purposes of program evaluation.

I acknowledge that I have received a copy of the **Tejano Center for Community Concern’s Privacy Policy**.

I may be referred to other housing services of the organization or other 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 **Tejano Center for Community Concerns** provides information and education on numerous loan products and housing programs and I further understand that the housing counseling I receive from **Tejano Center for Community Concerns** in no way obligates me to choose any of these particular loan products or housing programs.

Print Primary Borrower’s Name

Print Co-Borrower’s Name

Primary Borrower’s Signature

Date

Co-Borrower’s Signature

Date





Affordable Housing Program

6901 Brownwood St.

Houston, TX 77020

PHONE: (713) 673-1080

EMAIL: housing@tejanocenter.org

Statement of Non-Obligation

The Affordable Housing Program at Tejano Center for Community Concerns is a HUD Approved nonprofit counseling agency. Tejano Center for Community Concerns offers an array of services to meet the needs of our clients and the community at large. These are the services Tejano Center for Community Concerns provides, but not limited to:

Affordable Housing Program:

Pre Purchase Homebuyer Education Workshop: Eight hour group education class which covers the home buying process.

Pre Purchase Counseling: Private individual counseling to assess mortgage readiness & assistance eligibility.

Financial Management/ Budget Counseling: Private individual counseling to address any issues related to homeownership.

Mortgage Delinquency and Default Resolution Counseling: Private individual counseling to address retention and/or disposition housing options.

- Baylor College of Medicine Teen Health Clinic
- Nueva Vida Elderly Housing
- Juvenile Justice Diversion Program
- Raul Yzaguirre Schools for Success
- Child Placing Agency
- Adult Education Services

Tejano Center for Community Concerns also has financial arrangements, but not limited to:

- Bank of America
- BBVA Compass
- Community Bank
- Capital One
- Chase
- eHomeAmerica
- National Council of La Raza
- NeighborWorks America
- OCWEN Loan Servicing
- Wells Fargo Bank

Tejano Center's Affordable Housing Program is an impartial service provider and will in no way pressure clients to purchase Tejano Center homes, utilize an affiliate or any of our current or future services. You may find other housing agencies offering similar services by visiting www.hud.gov/housingcounseling

Client Agreement

I (We) understand that participation in any of Tejano Center for Community Concerns services does not obligate me (us) to receive any of the other Tejano Center for Community Concern services or from any of their exclusive partners. I (We) also understand that I (we) have the right to freely choose my own house, lender, and/or any other type of service related to my home buying process. I (we) also understand that Tejano Center for Community Concerns is not obligated to sell a home or provide any of the other services to me(us).

Print Primary Client's Name

Print Co-Client's Name

Primary Client's Signature

Date

Co-Client's Signature

Date





Affordable Housing Program

6901 Brownwood St.

Houston, TX 77020

PHONE: (713) 673-1080

EMAIL: housing@tejanocenter.org

Authorization to Disclose

Borrower's Name: _____ **Last Four Social Security Numbers:** _____

Co- Borrower's Name: _____

Property Address: _____

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

Telephone Number: _____

Lender/Servicer: _____

Mortgage Loan Number: _____

HOUSING COUNSELORS: **Diana Martinez & Gabriela Hernandez**

I authorize Tejano Center for Community Concerns Affordable Housing Program staff and NFMC Grantee; NCLR employee Eric Salazar to speak on my behalf regarding my loan with my lender and with whoever has servicing responsibilities for my loan.

I also authorize the lender/servicer handling my loan to discuss my loan with Tejano Center for Community Concerns Affordable Housing Program staff and NFMC Grantee. This authorization is good until revoked in writing by the client.

I authorize Tejano Center for Community Concerns to pull my credit report 2 to 3 times within the next 3 yrs. To evaluate my credit for housing counseling purposes.

I authorize the lender and/or servicer to notify Tejano Center for Community Concerns in the event that my loan payments become delinquent in the future, if the lender or servicer chooses to provide this service.

This authorization expires one year from date signed.

Primary Client's Signature

Date

Co-Client's Signature

Date



Monthly Budget/Expenses Sheet

Please fill in with your household monthly expenses for each section.

Housing	Amount
Mortgage Payment	
Homeowners Insurance & Property Taxes	
Homeowners Association	
Utilities	
Electric	
Natural Gas	
Water/Sewer/Trash	
Telephone	
Cellphone	
Cable/Satellite	
Internet	
Transportation	
Car Payment #1	
Car Payment #2	
Gasoline	
Car Insurance	
Car Repair & Maintenance	
Public Transportation	
Parking & tolls	
Food	
Groceries	
Eating Out	
School Lunches	
Work Related (lunches and snacks)	
Insurance	
Health (medical/dental if not payroll deducted)	
Life	
Disability/Accidental	
Medical	
Doctor	
Dentist	
Prescriptions	
Other: _____	
Child Care	
Childcare or babysitter	
Child Support/Alimony	
Children Allowance	
Other: _____	

Entertainment	Amount
Movies, Concerts, etc.	
Video Rentals	
Clothing	
Clothing	
Landry/Dry Cleaning	
Donations	
Tithe/Church	
Charity	
Education	
Tuition & lessons	
Books, papers & supplies	
Newspapers & magazines	
Other: _____	
Gifts	
Birthdays	
Holidays	
Family \$ Contributions	
Personal	
Barber & Beauty Shop	
Personal Care Products	
Tobacco/wine/liquor	
Household/Cleaning Products	
Other: _____	
Miscellaneous	
Home Maintenance /Furnishings	
Checking/Saving acct. fees	
Pet Care & Supplies	
Debts	
Student Loans	
Credit Card #1	
Credit Card #2	
Credit Card #3	
Credit Card #4	
Medical Bills	
Personal Loans	
Other: _____	
Other: _____	
Other: _____	

Primary Client Signature Date

Co-Client Signature Date