



HOMEOWNERSHIP CENTER INTAKE FORM

Applicant

Name: _____

Address: _____

Zip Code: _____ Cell Phone: _____

Email: _____

DOB: _____ Age: _____

Family Size: _____ Total Household Income: _____

Marital Status:

- Single Married Separated Divorced
 Widowed

Gender:

- Male Female

Do you have a disability? Yes No

Are you a Veteran? Yes No

Active Military? Yes No

English Proficient? Yes No

Current Housing Arrangement:

- Rent
 Homeless
 Homeowner with mortgage
 Living with family member
 Homeowner with mortgage paid off

Rural Status? Yes No

Have you owned a home in the last three years?

- Yes No

Are you in contract on a house at this time?

- Yes No

Are you currently working with a real estate agent?

- Yes No

Household Type:

- Female headed single parent household
 Male headed single parent household
 Single adult
 Two or more unrelated adults
 Married with children
 Married without children
 Other: _____

Education:

- Never Attended School
 Grades K-8 (Elementary)
 Grades 9-11 (Some High School)
 Grade 12 or GED (High School Graduate)
 College 1-3 years (Some College)
 College 4 years (College Graduate)

Co-Applicant

Name: _____

Address: _____

Zip Code: _____ Cell Phone: _____

Email: _____

DOB: _____ Age: _____

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Employment Status:

- Employed Full Time
- Employed Part Time
- Unemployed and looking for work
- Unable to work due to disability
- Stay-at-home caregiver or parent
- Retired
- Student
- Employed Full Time **AND** Student
- Employed Part Time **AND** Student

Name of Employer: _____

Address: _____

Phone number: _____

Title: _____

Date of hire: ____/____/____

Gross Income (before taxes): \$_____

Is this amount paid: Hourly Weekly Every two weeks Twice a month Monthly

Savings: \$_____ Retirement: \$_____

If you are not employed, please specify source of income: *Check all that apply*

- Alimony
- Child Support
- SSI/SSD
- Pension
- Self-Employed
- Unemployment
- Other: _____

Ethnicity:

I do not wish to furnish this information (initials) _____

 Hispanic or Latino Not Hispanic or Latino**Race:**

- Hispanic or Latino Not Hispanic or Latino
- American Indian or Alaska Native Asian
- Black or African American Native Hawaiian or Other Pacific Islander White Other Multiple Race

How did you hear about us?

- Newspaper
- Referral from County or Government office
- Media
- Lender/Bank
- Social Media FaceBook Instagram Twitter
- CDCLI Orientation
- Other: _____

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 Hispanic or Latino Not Hispanic or Latino**Race:**

- Hispanic or Latino Not Hispanic or Latino
- American Indian or Alaska Native Asian
- Black or African American Native Hawaiian or Other Pacific Islander White Other Multiple Race

Relationship to Applicant:

- Spouse Child Brother/Sister
- Girlfriend/Boyfriend Parent

How did you hear about us?

- Newspaper
- Referral from County or Government office
- Media
- Lender/Bank
- Social Media FaceBook Instagram Twitter
- CDCLI Orientation
- Other: _____

Applicant: _____

Date: _____

Co-Applicant: _____

Date: _____

CDCLI Office Use Only:

Intake Date: _____

Intake Initials: _____

Client ID #: _____



Community Development Corporation of Long Island, Inc.
2100 Middle Country Road, Centereach, New York 11720
(631) 471-1215 • Fax: (631) 471-3087 • www.cdcli.org

CLIENT AGREEMENT AND AUTHORIZATIONS

You have requested that the Community Development Corporation of Long Island, Inc. (CDCLI) provide you with housing counseling services. We are very pleased to have the opportunity to work with you and assist you with your housing and financial needs. This will describe certain understandings with respect to the services being provided and our respective roles and responsibilities.

COUNSELOR ROLE & RESPONSIBILITY:

- Review your housing goal and your finances; which include your income, debts, assets, and credit history.
- Prepare a client action plan that lists the steps to take in order to achieve your goals.
- Prepare a household budget that will help you manage your debt, expenses, and savings.
- Present reasonable options available based on your current situation.
- Provide guidance and education in support of your goals. Your counselor is not responsible for achieving your goals.
- Offer referrals to needed resources.
- Provide services competently, honestly, and respectfully.

CLIENT ROLE & RESPONSIBILITY:

- Provide accurate information about your income, debts, expenses, credit and employment.
- Attend meetings, return calls, and promptly provide requested paperwork.
- Complete the steps assigned to you in your Action Plan.
- Attend educational workshops (e.g. Homebuyer Education) as recommended.
- Retain an attorney if seeking legal advice and/or representation in matters such as foreclosure or bankruptcy protection.
- Work cooperatively with your counselor in the provision of services.

NO LEGAL ADVICE: CDCLI counselors may answer questions, make referrals for services, and provide information but cannot provide legal or tax advice on any matter including those related to foreclosure, bankruptcy, lending, leasing or house closings.

AUTHORIZATIONS: It may be necessary for CDCLI (1) to obtain, receive, and/or verify information about you from unaffiliated third parties; and (2) to disclose, share and/or discuss information about you with such third parties. To assist you, you agree as follows:

Authorization for Third Parties: You authorize CDCLI to initiate, and/or engage, in written or oral communication with, any and all lenders, banks, government agencies, mortgage servicers, creditors, employers, non-profit service providers, or credit reporting agencies, not-for-profit agencies, corporations, foundations, and/or other third parties, to discuss, review, examine and/or disclose your file relating to the housing counseling services you are receiving, including the contents thereof, as well as any and all aspects of your case, including your situation, challenges or opportunities related thereto, for any purpose reasonably believed by CDCLI to be necessary or desirable. You understand and agree that, in connection with such communications, personal information about you and your case will be disclosed, shared, received, verified, and discussed. If the services you are receiving from CDCLI relate to mortgage foreclosure counseling, then you specifically understand and agree that, in addition, your current mortgage situation, including a possible work out, repayment, refinance, delinquency or any other assistance, will be disclosed, shared, received, verified, and discussed with such parties. If the services you are receiving relate to home buyer counseling/education, then we may also contact your lender to obtain a copy of your Closing Disclosure Form.

Authorization for Credit Report and Score: You authorize CDCLI to obtain and review your credit report and score, from a Consumer Credit Reporting Agency as CDCLI shall choose, and to use and share information contained therein as set forth above. In the event a credit report and score is ordered on more than one client signing this authorization, then CDCLI is also authorized to share the information received between such clients. CDCLI may obtain such credit reports and scores up to two more times. Fees obtained for education address the cost the agency incurs for ordering credit reports.

Authorization for Program Funders: You authorize CDCLI to disclose information on you, for program reporting, reviewing, compliance, monitoring, auditing, research or oversight, to funders or program partners such as HUD, NYS Housing & Community Renewal, and the NYS Attorney General, Empire Justice Center, and NeighborWorks America under various programs including the Project Reinvest: Financial Capability Program. As part of such disclosure, your client-level information relating to our programs and services will also be uploaded through Client Management Systems and your client files will be available to our program partners for reporting, reviewing, compliance, monitoring, auditing, research or oversight.

CLIENT FOLLOW-UP/QUALITY ASSURANCE: In order to assess client satisfaction and program evaluation, CDCLI, or its partners, such as NeighborWorks America, may contact you within three years, in connection with programs and services provided including NeighborWorks America, Project Reinvest: Financial Capabilities Program, as applicable.

ERRORS AND OMISSIONS AND DISCLAIMER OF LIABILITY: You agree that CDCLI, its employees, agents, officers, directors, and affiliates, are not liable for any claims, liabilities, causes of action, expenses or damages whatsoever arising from actions, errors or omissions by such parties, related to the services provided to you, your participation in CDCLI counseling, or the disclosure of your information, and you hereby release and waive all claims, liabilities, causes of action, expenses and damages, against CDCLI, its employees, agents, officers, directors and affiliates whether now existing or hereafter arising. You have read this document, understand that you 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.

Client Name: _____ Social Security Number: _____

Client Signature: _____ Date: _____

Client Name: _____ Social Security Number: _____

Client Signature: _____ Date: _____

Counselor: _____ Date: _____



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PROGRAM DISCLOSURE FORM (AS PER 24 CFR 214.303)

ABOUT US: Community Development Corporation of Long Island, Inc. (CDCLI) is a 501(c)(3) nonprofit, HUD-approved comprehensive housing counseling agency. We are a chartered member of NeighborWorks America and rated as an "exemplary" organization. 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.).

CDCLI SERVICES: CDCLI provides the following programs and services:

First Time Home Buyer Education: A course designed to prepare those who are mortgage ready for the process of purchasing a home. This involves an 8-hour course (taken in person or on-line) followed by a one-to-one session with a counselor.

Home Buyer Counseling: Longer term counseling to prepare those in becoming ready to purchase a home including individual counseling to review your financial situation and credit report, mortgage terms and process, and what to expect at closing.

Grants for First Time Homebuyers: CDCLI administers funds through NYS to assist income eligible buyers with down payment and rehabilitation costs on their first house.

Financial Fitness, Health & Wealth Counseling: A program to learn how to maximize income, increase savings, improve credit, and reduce debt. May include one-to-one financial coaching sessions to get personalized guidance to achieve full financial potential.

Home Maintenance Training: Provide an in-house course on basic elements of home repair.

Foreclosure Counseling: Assists homeowners who have fallen behind or who are in danger of falling behind on their mortgage. You are counseled through the process and work out options, if available, and assisted with organizing an effective exit strategy if no other options are available.

Reverse Mortgage Counseling: Assists seniors by explaining how reverse mortgages work and their implications, the appropriateness of a reverse mortgage for your situation and alternatives.

Loans for First Time Home Buyers & Home Owners: Through our affiliate, CDCLI Funding Corporation, loans and grants may be applied for to assist with down payment and closing costs, home improvement, Voucher Home Ownership, or septic system replacement.

Single family & multi-family rental housing: CDCLI, and its affiliates, develop and own rental housing throughout Long Island, including our Rent to Own Program. We also assist the Suffolk County LandBank with developing, marketing and selling single family homes.

CDCLI RELATIONSHIPS WITH INDUSTRY PARTNERS AND AFFILIATES: CDCLI has financial and professional affiliations with other industry partners, including but not limited to, HUD, NeighborWorks America, the State of New York, including NYS Housing and Community Renewal, the State of New York Mortgage Agency (SONYMA), the NY Mortgage Coalition, the NYS Attorney General's office, the County of Suffolk, the Town of Brookhaven, the Town of Babylon, CitiBank, JPMorgan Chase, Santander, Capital One, and Bank of America. A complete list of Industry partners can be found at www.cdcli.org. CDCLI receives on-going financial support from these agencies in the form of grants, loans or fees for service and we want to make you aware of this fact. For example, (a) CDCLI is a member of the NY Mortgage Coalition and, therefore, receives a fee from participating lenders (such as Citibank) if a client utilizes such lender for a mortgage product; and (b) CDCLI packages a second mortgage product on behalf of Peoples Bank and receives a fee for such services. CDCLI also works with its two affiliates, CDCLI Funding Corporation and CDCLI Housing Development Fund Corporation. These affiliates make loans available to first-time home buyers and homeowners for down payment assistance, home improvement and Voucher Home Ownership and develop, own, rent and lease single family houses to income eligible individuals.

RIGHT TO CHOOSE OTHER SERVICES, PROGRAMS & PRODUCTS: In the process of providing you with consultation and counseling, CDCLI may advise you of, and refer you to, programs and services offered by CDCLI, its affiliates, and its industry partners, including those described above.

We want you to know that you are absolutely under no obligation to utilize any of the programs or services offered by CDCLI, its affiliates or its industry partners. You are free to choose whatever lenders, lending products, real estate professionals, attorneys, advisors, counselors, or other services, programs and products that you wish and that best meet your needs, regardless of any recommendations made by CDCLI.

Further, we encourage you to review and seek alternative services, programs and products from other entities offering products and services similar to CDCLI including the Federal Housing Administration (FHA), Long Island Housing Services (LIHS), or the Economic Opportunity Council, Inc. (EOC), for other lending products or first-time homebuyer and counseling programs.

REFERRALS AND COMMUNITY RESOURCES: You are being provided a resource list which identifies alternative agencies that provide services, programs, or products identical or similar to those offered by CDCLI, its affiliates and industry partners and which outlines other area services available to meet a variety of needs, including utilities assistance, emergency shelter, transitional housing, food banks, and legal aid assistance. A copy of the Referral and Community List is attached as Schedule A.

CONFLICT OF INTEREST POLICY: No CDCLI 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.

The undersigned acknowledge(s) that he/she/they received, reviewed, and agree to CDCLI's Program Disclosures as stated above.

CLIENT(S)

Client Name: _____

Client Signature: _____ Date: _____

Client Name: _____

Client Signature: _____ Date: _____

COUNSELOR:

The undersigned, Counselor, has reviewed CDCLI's Program Disclosures, as stated above, with the Client(s).

Counselor: _____ Date: _____

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.



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PRIVACY & DISCLOSURE POLICY

CDCLI is committed to the privacy of individuals and/or families who have come to us for assistance. We realize that the concerns you bring to us are highly personal in nature. We assure you that all information shared with us will be managed within legal and ethical considerations. However, in order to provide program services to you and to remain in compliance with our program partners who provide CDCLI with funds and programs to provide services to you, it will be necessary for CDCLI to disclose all or a part of your “non-public personal information” to certain parties. “Non-public personal information” is information that identifies you personally and is not generally known to the public such as your Social Security Number, credit history, income, employment history, financial assets, bank account information and financial debts. It does not include anonymous, aggregated case file information for purposes of research and analysis.

It is important that you clearly understand how we use, manage and disclose the personal information we collect about you. The following describes our policy regarding the collection and disclosure of your “non-public personal information.”

HOW DO WE SECURE YOUR INFORMATION?

CDCLI maintains physical, electronic and procedural safeguards that comply with federal regulations to guard your non-public personal information from unauthorized use or disclosure. Client files are maintained in locked file cabinets and electronic client files are kept secure and accessible only to necessary or authorized individuals.

WHAT CATEGORIES OF INFORMATION DOES CDCLI COLLECT FROM YOU & DISCLOSE?

- Information you provide on applications/forms/surveys or other forms of electronic or verbal communication. This information may include your name, address, Social Security number, employer, occupation, account numbers, assets, expenses, and income, as well as demographic information such as age, race and ethnicity
- Information on the services we are providing such as the number and type of services, outcomes, outputs, challenges and the fact that you are receiving services
- Information we receive from third parties such as your creditors or employment or personnel references
- Information about your transactions with us, our affiliates, or others such as your account balance, monthly payment, payment history and method of payment
- Information we receive from a consumer credit reporting agency such as your credit bureau reports, your credit and payment history, your credit scores, and/or your creditworthiness
- Information we may receive from you in program evaluation follow-up

TO WHOM DOES CDCLI DISCLOSE THE INFORMATION?

- Employees and affiliates of CDCLI who may need to know that information in order to (i) provide you with products or services to assist you; (ii) to aid employees in performing their duties; or (iii) monitor, evaluate, report, review, audit or research
- Funders or program partners such as HUD, NeighborWorks America, NYS Housing & Community Renewal, and the NYS Attorney General, for program reporting, reviewing, monitoring, auditing, research or oversight
- Unaffiliated third parties as required by law or legal order
- Unaffiliated third parties such as lenders, banks, government agencies, mortgage servicers, creditors, employers, non-profit service providers, credit reporting agencies, corporations, foundations, and legal counsel, for purposes of providing you with products or services

OPTING OUT OF CERTAIN DISCLOSURES TO UNAFFILIATED THIRD PARTIES

You may “Opt Out” and direct that CDCLI *not* disclose your nonpublic personal information to certain unaffiliated third parties (other than disclosures required by law or legal order and disclosures to our funders and program partners). You may “opt-out” at any time by emailing us at homebuyer@cdcli.org. Please be aware that, if you “Opt-Out,” then we may not discuss your case with creditors or others and we will be limited in the services we are able to provide to you.

Unless and until you elect to “Opt-Out,” CDCLI is authorized to disclose your non-public personal information as stated above and as you may further agree by your signed **Client Agreement and Authorization Form**.

I acknowledge that I have read and understand the above privacy practices and disclosures and have been given a copy for my records.

Client Name: _____

Client Signature: _____ Date: _____

Client Name: _____

Client Signature: _____ Date: _____

Counselor, identified below, has reviewed the above privacy practices and disclosures with the client(s).

Counselor: _____ Date: _____

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



HOME BUYER EDUCATION DOCUMENT CHECK LIST

Name: _____ Date: _____

Address: _____

Phone Number: _____ Email Address: _____

This checklist will help ensure that you are prepared for your counseling appointment. Please check off the appropriate box once you have ensured that all the required documentation is provided for both the applicant and co-applicant, *if applicable*.

PLEASE PROVIDE PHOTOCOPIES OF ALL DOCUMENTS

*MANDATORY DOCUMENTS NEEDED

REQUIRED DOCUMENTATION:

- (2) Form of valid NYS ID*
- (1) Month of consecutive pay stubs for **applicant/co-applicant***
- Proof of additional income such as worker's compensation, unemployment, pension, maintenance, child support, annuities, SSI, Veteran's benefits, etc. *if applicable*
- (3) Most recent years of Federal Tax Return (form 1040) with W-2/1099*
- (1) Month of statements (checking, savings, 401k, pension, etc.)*
- Child support court order, and copies of checks/money orders, *if applicable*
- Separation or divorce papers, *if applicable*
- Bankruptcy discharge documents, *if applicable*

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2100 Middle Country Road ▪ Centereach ▪ New York ▪ 11720



We Invest in Your DreamsSM
www.cdcli.org



CDCLI MONTHLY BUDGET WORKSHEET

CLIENT NAME:

DATE:

EXPENSES	Current	Plan	Spent	EXPENSES	Current	Plan	Spent
HOUSING				INSURANCE			
Rent/Mortgage				Auto Insurance			
Electricity				Life Insurance			
Heating(Gas, Oil)				Homeowners/Renters			
Water/Sewer				Health Insurance			
Cell Phone				Total	\$0.00		
Cable/Internet/Phone							
Total	\$0.00			MEDICAL			
				Medication			
FOOD				Doctor's visits			
Food/Groceries				Dentist			
Food at Work (dailyx20days)				Total	\$0.00		
School Lunches x20days							
Eating Out				GIFTS & DONATIONS			
Total	\$0.00			Birthday Gifts/Other gifts			
				Church Donations			
TRANSPORTATION				Other Charities			
Car Payment							
Gas				Total	\$0.00		
Repairs/other							
Public Transportation				ENTERTAINMENT			
Total	\$0.00			Movie Rental			
				Athletic Events/Hobbies	\$0.00		
PERSONAL				Vacations			
Personal Items/Toiletries				Total	\$0.00		
Barber/Beauty Shop							
Nail care				OTHER			
Allowance for Children				Mad Money			
Child Care				Pet Supplies			
Child Support/Alimony				Postage			
Tobacco				Checking Account Fees			
Alcoholic Beverages				Picture/Photo Processing			
Total	\$0.00			Total	\$0.00		
				DEBT REPAYMENT			
CLOTHING				Credit Cards			
Laundry/Dry Cleaning				Loans			
Purchase of Clothing (Seasonal)				Total	\$0.00		
Total	\$0.00						
				MONTHLY SAVINGS			
EDUCATION				Regular Savings			
School,Fees/Books/Supplies				IRA/Roth Savings			
Newspaper/Magazine				Emergency Fund			
Total	\$0.00			Down-Payment Saving Fund			
				Total	\$0.00		
HOME MAINTENANCE							
Lawn Care							
Cleaning Supplies							
Total	\$0.00			Monthly Totals	\$0.00		

Total Monthly Expenses	Monthly Income	Surplus/Deficit
\$0.00		\$0.00

Signature

Signature