



1222 Main Street
St. Johnsbury, VT 05819
800.234.0560 TTY 800.253.0191
ruraledge.org

Homebuyer Education Workshop

Thank you for allowing the HomeOwnership Center to help you through the home-buying process. The purpose of this program is to help you become a successful homeowner.

Your first step is to **register** for a Homebuyer Education class. Please see class options below:

- Take the **in-person class** that is held on the **third Saturday** of the month. The fee for the in-person class is \$85.00 dollars. If you pay ahead of time, the fee for the in-person class is \$50 dollars.
- Take the **virtual zoom option** during the same time as the in-person class that is held on the **third Saturday** of the month. The fee for the virtual zoom class is \$85 dollars.
- Take the **online class anytime** by going to ehomeamerica.org. The fee for the ehome class is \$100 dollars. There is a discount code (ruraledge14) that will give you \$14 dollars off to make the online class \$86 dollars.

The class fee covers you and one other person from your household who wishes to attend. The in-person and virtual zoom class schedule are on the last page of this intake packet. Be sure to register for the in-person and virtual class early because space is limited!

Following the workshop, you will be assigned to meet with your personal HUD certified counselor who'll work with you throughout the process of buying your home. To help your counselor get familiar with your needs and opportunities, we ask that you fill out the enclosed **Personal Intake Registration Form**.

Please mail or drop off the completed intake form with your registration fee to:

Rural Edge
Attn: Homeownership Center
1222 Main Street
St. Johnsbury, VT 05819

If you are taking the class in-person or as a virtual zoom option during the in-person class, you can drop off or mail the intake packet and check written out to Rural Edge at 1222 Main Street, St. Johnsbury located between the Hilltopper restaurant and secondhand bookstore.

Please feel free to call 802-473-3919 or 802-535-3555 or email us at homeownership@ruraledge.org with any questions you may have. You can also find us at www.ruraledge.org.



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St. Johnsbury, VT 05819
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Personal Intake Registration Form

This is NOT an application for a loan!

CUSTOMER

Name: First MI Last

Mailing Address: Street City State Zip Code

Physical Address: Street City State Zip Code

Home Phone: ()

Work Phone: ()

Cell Phone: ()

Email:

Social Security #:

Birth Date: / /

Education: No High School Diploma, High School Diploma /Equivalent, Other (Describe), Two Year College Degree, Bachelor's Degree, Master's Degree, Above Master's Degree

Marital Status: Single, Married, Civil Union, Divorced, Widowed, Separated

Handicapped or Disabled? No, Yes Do you need an accommodation?

Are you Active Military? No, Yes Veteran? No, Yes

Current Housing Arrangement: Rent, Homeowner with Mortgage, Homeless, Homeowner with Mortgage Paid Off, Other (Describe), Living with Others/Not Paying Rent

Are You a First Time Homebuyer? (You currently do not own a home and have not owned a home in the past three (3) years.) No, Yes

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 (Describe)

Which In Person-Homebuyer Education Class will you be attending? (Check One): Jan, Feb, Mar, Apr, May, Jun, Jul, Aug, Sep, Oct, Nov

Online

How did you hear about us? Brochure, Workshop Flyer, HUD, Lender, Newspaper Ad, Social Service, Radio, Real Estate Agent, USDA, Website, Social Service, Word of Mouth



Do you receive Section 8 Rental Assistance? No Yes If yes, when did assistance begin? _____

Have you applied for Section 8 Assistance through VSHA (Vermont State Housing Authority)? No Yes

Family/Household Size: _____ (Please use back page if more space is required.)

Dependents:

Name: _____ Age: _____ Relationship: _____
 Name: _____ Age: _____ Relationship: _____
 Name: _____ Age: _____ Relationship: _____
 Name: _____ Age: _____ Relationship: _____
 Name: _____ Age: _____ Relationship: _____

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

Non-Dependents:

Name: _____ Age: _____ Relationship: _____
 Name: _____ Age: _____ Relationship: _____
 Name: _____ Age: _____ Relationship: _____

CUSTOMER EMPLOYMENT

Primary Employer: _____

_____ () _____
 Street City State Zip Code Phone

 Full Time Part Time _____ / ____ / ____
 Title or Job Description Hire Date

Can you be contacted at work? No Yes

Gross Monthly Income (Before Taxes) \$ _____ Annual \$ _____

Secondary Employer: _____

_____ () _____
 Street City State Zip Code Phone

 Full Time Part Time _____ / ____ / ____
 Title or Job Description Hire Date

Can you be contacted at work? No Yes

Gross Monthly Income (Before Taxes) \$ _____ Annual \$ _____



ALL HOUSEHOLD INCOME

Type of Income	Customer Monthly Amount	Co-Customer Monthly Amount
Salary/Employment Income		
Self-Employed Income		
Unemployment Income		
Alimony/Child Support Income		
Public Assistance Income		
Social Security Income		
Disability Income		
Pension Income		
Other:		
Annual Family/Household Income		\$

Can you document your child support/alimony income? No Yes Expires: _____

If a household member receives SSI or SSDI, how long will the payments continue? _____

Regarding seasonal employment, have you worked in this field for two (2) or more years? No Yes

If you receive disability income, is it for a permanent disability? No Yes

Current Monthly Rent or Mortgage: _____
Customer Co-Customer

WHERE ARE YOU IN THE HOME BUYING PROCESS?

Which financial institution do you use? _____

Have you...? (Please check all that apply)

<i>Submitted a Mortgage Application?</i>	<input type="checkbox"/> Lender/Loan Officer Name & Contact Number _____
<i>Have a Signed Purchase and Sales?</i>	<input type="checkbox"/> Real Estate Agent _____
<i>Completed Home Inspection?</i>	<input type="checkbox"/> Who? _____
<i>Received Financing Commitment Letter?</i>	<input type="checkbox"/> No <input type="checkbox"/> Yes
<i>Have a Closing/Settlement Agent?</i>	<input type="checkbox"/> Who? _____
<i>Have a Closing Date?</i>	<input type="checkbox"/> When? _____
<i>Other:</i>	_____

Do you have any savings (capital) for down payment and closing costs? No Yes

How much savings do you have for down payment and closing costs? _____

BUDGET/SPENDING PLAN

<u>Your Bills and When they are Due</u>		Next Due Date of Bill	Monthly Payment	Principal Balance	Amount Past Due
Housing	Rent or Mortgage (1st)				
	Rent or Mortgage (2nd)				
	Electricity payment				
	Fuel/Oil / Wood/ Propane				
	Home Telephone				
	Cell Phone				
	Cable/Satellite				
	Internet				
	Water				
	Sewer/Septic				
	Other:				
Food	Groceries				
	Lunches – including school				
	Eating Out				
	Snacks				
	Other:				
Transportation	Vehicle #1				
	Vehicle #2				
	Gas				
	Car Insurance				
	Car Repairs / Tires				
	Public Transportation				
	Other:				
Health	Health Insurance Premium				
	Medical / Dental Co-pay				
	Prescriptions				

	<u>Your Bills and When they are Due</u>	Next Due Date of Bill	Monthly Payment	Principal Balance	Amount Past Due
Children	Child Care				
	Activities and Sports				
	School Costs				
	Toys, Books, Games, Etc.				
	Other:				
Credit, Loans, Savings	Credit Card #1:				
	Credit Card #2:				
	Loan #1:				
	Loan #2:				
	Loan #3:				
	Savings for:				
	Other:				
Luxury Items	Gifts				
	Alcohol/ Tobacco products/ Habits				
	Movies or video purchases and rentals				
	Books, newspapers or magazines				
	Pet care (vet)				
	Travel, vacation, camping, hunting/fishing				
	ATV's, snowmobiles				
	Clothes (all family members)				
	Personal care items				
	Charity / Church				
	Other:				

AUTHORIZATION

I authorize the HomeOwnership Center to:

- a) Pull my/our credit to review my/our credit file for housing counseling in connection with my pursuit on a loan to purchase real property;
- b) Pull my/our credit report and review my/our credit file for informational inquiry purposes; and
- c) Obtain a copy of the Closing Disclosures from the lender who granted me/us a loan or the Title Company/Lawyer that closed the loan when I purchased a home.
- d) I have received a copy of the RuralEdge Privacy Policy and Practices
- e) Send notifications to me via text message, email or other means of communication as needed.
 - Do you wish to opt out of the text message notification option? No Yes

Customer

Date

Customer

Date

Please Complete and Return to:
 RuralEdge NeighborWorks® HomeOwnership Center
 1222 Main Street, St. Johnsbury, VT 05819
 (802) 535-3555 x1304 ♦ Toll Free - (800) 234-0560
 Online at ruraledge.org ♦ Email at homeownership@ruraledge.org
"This institution is an equal opportunity provider and employer"

"The following information is requested by the Federal Government in order to monitor compliance with Federal Laws prohibiting discrimination against applicants seeking to participate in this Program. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose to not furnish this information, we are required to note the race/national origin of the individual applicant(s) on the basis of visual observation or surname."

CUSTOMER	CO-CUSTOMER
<p>Ethnicity (Select One)</p> <p><input type="checkbox"/> Hispanic or Latino</p> <p><input type="checkbox"/> Not Hispanic or Latino</p> <p>Race (Select One or More)</p> <p><input type="checkbox"/> White</p> <p><input type="checkbox"/> American Indian/Alaskan Native</p> <p><input type="checkbox"/> Native Hawaiian/Other Pacific Islander</p> <p><input type="checkbox"/> Asian and White</p> <p><input type="checkbox"/> American Indian/Alaskan Native and Black</p> <p><input type="checkbox"/> Black or African American</p> <p><input type="checkbox"/> Asian</p> <p><input type="checkbox"/> American Indian/Alaskan Native and White</p> <p><input type="checkbox"/> Black/African American and White</p> <p><input type="checkbox"/> Other</p> <p>Gender (Select One)</p> <p><input type="checkbox"/> Male <input type="checkbox"/> Female</p> <p>Were you born in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Ethnicity (Select One)</p> <p><input type="checkbox"/> Hispanic or Latino</p> <p><input type="checkbox"/> Not Hispanic or Latino</p> <p>Race (Select One or More)</p> <p><input type="checkbox"/> White</p> <p><input type="checkbox"/> American Indian/Alaskan Native</p> <p><input type="checkbox"/> Native Hawaiian/Other Pacific Islander</p> <p><input type="checkbox"/> Asian and White</p> <p><input type="checkbox"/> American Indian/Alaskan Native and Black</p> <p><input type="checkbox"/> Black or African American</p> <p><input type="checkbox"/> Asian</p> <p><input type="checkbox"/> American Indian/Alaskan Native and White</p> <p><input type="checkbox"/> Black/African American and White</p> <p><input type="checkbox"/> Other</p> <p>Gender (Select One)</p> <p><input type="checkbox"/> Male <input type="checkbox"/> Female</p> <p>Were you born in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>



AUTHORIZATION TO RELEASE INFORMATION

Name: _____

Social Security #: _____

Name: _____

Social Security #: _____

() _____

Address _____

Phone _____

I/We authorize the release of information to and/or from RuralEdge and the HomeOwnership Center (HOC) regarding my/our income, debt, credit, mortgage, rent, employment, homeowners/hazard insurance, housing situation, closing disclosure, and any other necessary information, including the procurement of a credit report at any time, in order to obtain, verify or re-verify any information for the purposes of assisting in the acquisition, financing, refinancing, retention or repair of housing.

I/We further agree that photocopies or facsimiles of this authorization may be used for the purposes stated above.

This document constitutes my/our consent for the following organization(s) to release information to RuralEdge and the HOC and for RuralEdge and the HOC to release information to said organization(s), for the purposes stated above:

- Attorneys and/or Title Companies Associated with the Transaction(s)
- Banks, Credit Union, and other Lending Institutions Associated with the Transaction(s)
- CBC Innovis, Equifax, Experian, and TransUnion
- Citizens Housing and Planning Association (CHAPA)
- Community Connections (NVRH)
- Homeowner's Insurance/Hazard Insurance Agencies and/or Companies
- NeighborWorks® America (NW)
- Northeast Employment and Training Org. Inc. (NETO)
- Northeast Kingdom Community Action (NECKA)
- Northern Counties Health Care
- State of Vermont Department of Financial Regulation
- Vermont Agency of Human Services (AHS)
- Vermont Community Development Program (VCDP)
- Vermont Department of Disabilities, Aging and Independent Living (DAIL)
- Vermont Housing Conservation Board (VHCB)
- Vermont Housing Finance Agency (VHFA)
- Vermont State Housing Authority (VSHA)
- U.S. Department of Housing and Urban Development (HUD)
- U.S. Department of Agriculture – Rural Development (USDA-RD)
- All of the Above
- All of the Above, Except: _____
- Other _____
- Other _____

This consent is given freely and is open to all information provided to or acquired by NCLC, RuralEdge and the HOC and/or the above organizations in connection with my/our pending acquisition, financing, refinancing, retention or repair of housing. This consent is in addition to the release of information as provided for my/our Customer Service Agreement with the HomeOwnership Center (if applicable).

I/We further agree that the HomeOwnership Center may use information, history, and photos in connection with your request for promoting the HomeOwnership Center, and for the preparation of proposals to the funders of NCLC, RuralEdge and the HOC. I/We also authorize the HomeOwnership Center to share information about the services I/we receive through the HomeOwnership Center with Vermont Housing Finance Agency for research and statistical purposes.

Name: _____

Date: _____

Name: _____

Date: _____



RURALEdge, INC.
PRIVACY POLICY AND PRACTICES

RuralEdge / Northeast Community Lending Corporation (NCLC) and the NeighborWorks® HomeOwnership Center value your trust. Protecting your confidential information is important to us. This notice describes our policy regarding the collection and disclosure of personal information.

RuralEdge / Northeast Community Lending Corporation does not sell or share any personal information with commercial companies for the purpose of marketing their products to you.

What Information We Collect

Personal information means information that identifies an individual and is not otherwise publicly available. This includes personal financial information, such as credit history, income, employment history, financial assets, bank account information, financial debts, Social Security number, and other information you provide on a Personal Profile or Intake application.

We collect personal information in order to provide financial fitness counseling, counseling to prepare you for applying for a home mortgage from a conventional lender, counseling to prevent foreclosure, and our own lending for down payment, closing costs, home rehab, or other purposes related to home purchase or foreclosure prevention.

Restrictions on Disclosure of Personal Information

In general, RuralEdge and the NeighborWorks® HomeOwnership Center disclose personal information only when necessary to provide services to you, or when allowed by law.

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

- ❖ Information we receive from you on applications for a loan or other product or service, such as name, address, telephone number, Social Security number, assets and income;
- ❖ Information about your transactions with us, such as your loan balance, payment history and parties to your transactions; and
- ❖ Information we receive from third parties such as credit bureaus, including information about your credit worthiness and your credit history.

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

- ❖ Financial service providers, such as companies engaged in providing home mortgages, reverse mortgages, or home equity loans;
- ❖ Other service providers with whom we may coordinate efforts in order to make efficient use of resources, such as NETO (weatherization), PATH (emergency assistance), NEKCA, VHCB (lead abatement), Vermont Center for Independent Living, or other nonprofit community resources.
- ❖ Other third parties when the information is provided to help complete a transaction initiated by you, such as reporting a payoff on a loan, or to otherwise administer our business, and other third parties who are involved in program review, auditing, research, or oversight purposes.



PRIVACY POLICY AND PRACTICES (Continued)

We may disclose personal information about you to third parties as permitted by law, such as auditors in connection with a financial audit of our offices, to Government entities, in response to a subpoena, and to credit bureaus.

In material intended for public distribution, such as newspaper articles, RuralEdge publications, press releases, or reports to funding sources, it is sometimes useful to illustrate our services by highlighting our work with a family or individual. In those cases, we will specifically seek your permission to use any personal information.

Medical Information

We will not use or share personally identifiable medical information about you for any purpose other than that which is authorized by you.

Protecting the Confidentiality of Your Personal Information

All RuralEdge employees are required to use strict standards of care regarding the confidentiality of your personal information as outlined in Personnel Policies. Employees not adhering to our policies are subject to disciplinary action. 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.

If You Want More Information

If you have any questions regarding our Privacy Policy, please contact the Director of NeighborWorks® HomeOwnership Center at (802) 535-3555 or toll free at (800) 234-0560 or you can write us at NeighborWorks® HomeOwnership Center, 1222 Main Street, St. Johnsbury, VT 05819.

HOMEBUYERS



WORKSHOP



2024 Schedule

January						
Su	Mo	Tu	We	Th	Fr	Sa
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

St. Johnsbury-RuralEdge Mt. View Community Room
8:15 AM - 4:30 PM

February						
Su	Mo	Tu	We	Th	Fr	Sa
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29		

St. Johnsbury-RuralEdge Mt. View Community Room
8:15 AM - 4:30 PM

March						
Su	Mo	Tu	We	Th	Fr	Sa
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

Barton-RuralEdge Pierce Block Community Room
8:15 AM - 4:30 PM

April						
Su	Mo	Tu	We	Th	Fr	Sa
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

Island Pond
8:15 AM - 4:30 PM

May						
Su	Mo	Tu	We	Th	Fr	Sa
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

St. Johnsbury-RuralEdge Mt. View Community Room
8:15 AM - 4:30 PM

June						
Su	Mo	Tu	We	Th	Fr	Sa
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30						

Canaan Alice Library
8:15 AM - 4:30 PM

July						
Su	Mo	Tu	We	Th	Fr	Sa
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

Barton-RuralEdge Pierce Block Community Room
8:15 AM - 4:30 PM

August						
Su	Mo	Tu	We	Th	Fr	Sa
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

Greensboro- United Church of Christ- Fellowship Hall
8:15 AM - 4:30 PM

September						
Su	Mo	Tu	We	Th	Fr	Sa
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

St. Johnsbury- Rural Edge Mountain View Community Room
8:15 AM - 4:30 PM

October						
Su	Mo	Tu	We	Th	Fr	Sa
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

Barton-RuralEdge Pierce Block Community Room
8:15 AM - 4:30 PM

November						
Su	Mo	Tu	We	Th	Fr	Sa
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

St. Johnsbury-RuralEdge Mt. View Community Room
8:15 AM - 4:30 PM

Saturday Workshops are from 8:30am to 4:30pm.

The registration fee is \$85.00.



Homebuyer's Education Workshop

CHARTERED MEMBER



St. Johnsbury Workshop held at the RuralEdge Mt. View Community Room located at 105 Mt. View Drive, St. Johnsbury, VT 05819

Barton Workshop held at the RuralEdge Pierce Block Community Room located at 16 Church Street, Barton, VT 05822

Please call 802-473-3919 or email homeownership@ruraledge.org to registrar for the class as there is limited space available



Schedule subject to change

