

HomeBuyer Education Workshop

Dear _____,

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 one of the monthly **HomeBuyer Education Workshops**.

The fee for the workshop is \$85.00. This covers you and one other person from your household who wishes to attend.

Following the Workshop, you will be assigned to meet with your personal HomeOwnership Specialist 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 the completed form with your registration fee to:

RuralEdge
Attn: HomeOwnership Center
P.O. Box 259
Lyndonville, VT 05851

Or, you can drop them off at **48 Elm Street, Lyndonville**, located right behind the Darling Inn or at **26 Compass Drive, Newport**, enter through the front of the building.

A schedule of upcoming 2021 **Homebuyer Education Workshops** is included on the back side of this letter. Be sure to register early because space is limited!

Please feel free to call 802.535.3555 ext. 1304 or 802-473-3917 or toll free at 800.234.0560 or email us at homeownership@ruraledge.org with any questions you may have. You can also find us at www.ruraledge.org.

Sincerely,

HomeOwnership Center
Enclosures

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

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

Family/Household Size: _____ (Use back of page if more space is required)

Dependents: Name: _____ Age: _____ Relationship: _____

Dependents: Name: _____ Age: _____ Relationship: _____

Dependents: Name: _____ Age: _____ Relationship: _____

Dependents: Name: _____ Age: _____ Relationship: _____

Dependents: Name: _____ Age: _____ Relationship: _____

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

If yes:

Name: _____ Age: _____ Relationship: _____

Name: _____ Age: _____ Relationship: _____

Name: _____ Age: _____ Relationship: _____

CUSTOMER EMPLOYMENT

PRIMARY EMPLOYER: _____

_____ Phone: () - _____

Street City State Zip Code

_____ Part-Time or Full-Time _____/_____/_____

Title or job description

Hire Date

Gross Monthly Income (before taxes): \$ _____ (Annual: \$ _____)

Can you be contacted at work? Yes or No

SECONDARY EMPLOYER: _____

_____ Phone: () - _____

Street City State Zip Code

_____ Part-Time or Full-Time _____/_____/_____

Title or job description

Hire Date

Gross Monthly Income (before taxes): \$ _____ (Annual: \$ _____)

Can you be contacted at work? Yes or No

Budget/Spending Plan

Your Bills and When they are Due		Next Due Date of Bill	Monthly Payment	Amount Past Due	Principal Balance
Housing	Mortgage (1 st) / Rent				
	Mortgage (2 nd) / Rent				
	Mortgage (3 rd) / Rent				
	Electricity				
	Oil / Wood				
	Other Fuel :				
	Telephone / Cell Phone				
	Cable TV / Satellite				
	Internet				
	Water / Sewer / Septic				
	Trash				
	Home Repair / Maintenance				
	Insurance (Escrowed: Yes or No)				
	Property Taxes (Escrowed: Yes or No)				
	Other:				
Food	Groceries				
	Lunches – including school				
	Eating Out				
	Snacks				

	Other:				
Transportation	Vehicle #1				
	Vehicle #2				
	Gas				
	Car Insurance				
	Car Repairs / Tires				
	Public Transportation				
	Other:				
Credit, Loans, Savings & Other	Credit Card #1:				
	Credit Card #2:				
	Credit Card #3:				
	Loan #1:				
	Loan #2:				
	Loan #3:				
	Savings for _____				
	Savings for Retirement				
	Other:				
	Other:				
Health	Health Insurance Premium				
	Medical / Dental Co-Pay				
	Prescriptions				
	Over the Counter Medications				
	Other:				
Children	Child Care				
	Activities and Sports				
	School Costs				
	Toys, Books, Games, Etc.				

	Other:				
Luxury Items	Gifts				
	Alcohol and tobacco products				
	Movies or video purchases and rentals				
	Books, newspapers or magazines				
	Pet care (vet)				
	Travel, vacation, camping				
	Hunting & Fishing				
	ATV's, snowmobiles				
	Charity				
	Clothes (all family members)				
	Personal care items: hair, etc.				

Notes or Comments:

ALL HOUSEHOLD INCOME

Type of Income	Customer Monthly Amount	Co-Customer Monthly Amount
Salary/Employment Income		
Self-employment Income		
Unemployment Income		
Alimony/Child Support Income		
Public Assistance Income		
Social Security Income		
Disability Income		
Pension Income		
Other Income:		
ANNUAL FAMILY AND / OR 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 2 or more years? No Yes

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

Customer

Co-Customer

Current monthly rent or mortgage: \$ _____ \$ _____

WHERE ARE YOU IN THE HOME BUYING PROCESS?

Which financial institution do you use? _____

Have you? Please check all that apply:

- Submitted a mortgage application To (lender or loan officer name and contact number): _____
- Have a signed purchase and sales Real Estate Agent: _____
- Completed inspection Who: _____
- Received financing commitment letter _____
- Have a closing / settlement agent Who: _____
- Have a closing date When: _____
- Other: _____ _____

Do you have any savings (capital) for closing cost or down payment? Yes No \$ _____

Are you about to receive additional funds (e.g., tax refunds, property sales, etc.)? Yes No

AUTHORIZATION

I authorize the Homeownership Center to:

- (a) pull my/our credit report 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 made me a loan or the Title Company/Lawyer that closed the loan when I purchase 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? Yes ___ No ___)**

_____ **Customer**

_____ **Date**

_____ **Co-Customer**

_____ **Date**

Please complete and return to:
RuralEdge NeighborWorks® Homeownership Center
 48 Elm Street, PO Box 259 Lyndonville, VT 05851
 802-535-3555 x 1304 ♦ toll free at 1-800-234-0560
www.ruraledge.org ♦ 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 it, we are required to note the race/national origin of the individual applicant(s) on the basis of visual observation or surname."

CUSTOMER

Ethnicity: (select one)

- Hispanic or Latino _____
- Not Hispanic or Latino _____

Race (select one or more):

- White _____
- American Indian/Alaskan Native _____
- Native Hawaiian/Other Pacific Islander _____
- Asian and White _____
- American Indian/Alaskan Native and Black _____
- Black or African American _____
- Asian _____
- American Indian/Alaskan Native and White _____
- Black/African American and White _____
- Other _____

Gender (select one):

- Male _____
- Female _____

Were you born in the US? Yes ___ No ___

CO-CUSTOMER

Ethnicity: (select one)

- Hispanic or Latino _____
- Not Hispanic or Latino _____

Race (select one or more):

- White _____
- American Indian/Alaskan Native _____
- Native Hawaiian/Other Pacific Islander _____
- Asian and White _____
- American Indian/Alaskan Native and Black _____
- Black or African American _____
- Asian _____
- American Indian/Alaskan Native and White _____
- Black/African American and White _____
- Other _____

Gender (select one):

- Male _____
- Female _____

Were you born in the US? Yes ___ No ___

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 Unions, and other lending institutions associated with the transaction(S)
- Factual Data, 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")
- United States Department of Agriculture - Rural Development ("USDA - RD")
- All of the above
- All of the above, except: _____
- Other: _____
- Other: _____
- Other: _____

This consent is given freely and is open to all information provided to or acquired by the HomeOwnership Center and / or the above organizations in connection with advocacy services provided in connection with my/our pending acquisitions, financing, refinancing, retention or repair of housing. This consent is in addition to the release of information as provided for in my / our Service Contract Agreement with the HomeOwnership Center.

I/We further agree that the HomeOwnership Center may use information, pictures, or quotes, in promoting the HomeOwnership Center, and for the preparation of proposals to the funders of the HomeOwnership Center. I/We also authorize the HomeOwnership Center to share information about the services I/we receive through the HomeOwnership Center with VHFA for research and statistical purposes.

 Date

 Date



HOMEBUYERS

WORKSHOP

2021 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 - 418 Railroad Street 8:15AM-4:30PM

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						

St. Johnsbury - 418 Railroad Street 8:15AM-4:30PM

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			

Newport - RuralEdge Shattuck Hill Mobile Home Park Community Room 8:15AM-4:30PM

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	

St. Johnsbury - 418 Railroad Street 8:15AM-4:30PM

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					

Newport - RuralEdge Shattuck Hill Mobile Home Park 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			

St. Johnsbury- RuralEdge Dean Hale Community Room 8:15AM-4:30PM

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

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

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				

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

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		

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

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						

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

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 8:15AM-4:30PM

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

The registration fee is \$85.00.



 Homebuyer's Education Workshop



St. Johnsbury Workshop held at the RuralEdge Mt. View Community Room located on 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

For More Information call toll free at 1.800.234.0560 or 1.802.473.3919
www.ruraledge.org or via email at homeownership@ruraledge.org



Schedule subject to change



RURALEdge, INC.

PRIVACY POLICY AND PRACTICES

RuralEdge 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 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 information. 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 loan application.

We collect the 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 kinds 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, VT 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.

We may disclose personal information about you to third parties as permitted by law, such as auditors in connection with a financial audit of us, to government entities, in response to subpoenas, 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 Manager of the NeighborWorks® HomeOwnership Center at (802) 535-3555, Toll Free at 800.234.0560 or write to NeighborWorks® HomeOwnership Center, PO Box 259, Lyndonville, VT 05851