

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 Workshop. 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 \$99 per household.
- Take the virtual zoom option that happens at the same time as the in-person class on the third Saturday of the month. The fee for the virtual zoom class is \$99.
- Take the online class anytime by going to ehomeamerica.org. The fee for the eHome class is \$99. However, there is a discount code (ruraledge14) that will give you \$13 off, making the online class \$86.

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 the intake packet. Be sure to register for the in-person & virtual classes early because space is limited!

Following the workshop, you will make an appointment to meet with your personal HUD certified Housing Counselor who will 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 Saint Johnsbury, VT 05819

If you are taking the in-person class or the virtual zoom class, you can drop off or mail your intake packet, along with a check written out to Rural Edge at 1222 Main Street, Saint Johnsbury, VT. We are located between the Hilltopper restaurant and the Secondhand Prose bookstore. If dropping off paperwork, please direct your completed intake, with payment, to our drop box, <u>on the wall</u>, at the right of our main entrance.

Feel free to call us at 802-473-3926 or 802-535-3555, or email us homeownership@ruraledge.org with any questions. More information about us can be found at www.ruraledge.org.







Personal Intake Form (This is NOT an Application)

CUSTOMER:

Name:					
	First		MI	Last	
Mailing Addr	ress:				
	Street		City	State	Zip Code
Physical Add	ress:				
	Street		City	State	Zip Code
Home Phone	:: ()		Work Phone:	()	
Cell Phone: ()		Email:		
Social Securi	ty #:		Birth Date:	///	
Education:	No High School Diploma	High Sch /Equivalent	ool Diploma	□ Other (Describe):	
	Diploma Two Year College Degree	Bachelo			
	☐ Master's Degree	🗆 Above N	laster's Degree		
Marital Statu	ıs: □Single □ Married □C	vil Union 🗆 Div	vorced 🗆 Widowed	□Separated	
Handicapped	l or Disabled? 🗆 No	🗆 Yes Do you r	ieed an accommodati	on?	
Are you Activ	ve Military? 🗆 No 🛛	□ Yes	Veteran? 🛛 No	□ Yes	
Current Hous	sing Arrangement:				
🗆 Rent		🗆 Homeo	owner with Mortgage		
🗆 Homeow	vner with Mortgage Paid Off	🗆 Homel	ess		
🗆 Living wi	th Others/Not Paying Rent	🗆 Other			
		(Describe)	• •		







	urrently 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 S Household	ingle Parent	□ Single Adult
Two or More Unrelated Adults	\Box Married with C	hildren	□ Married without Children
□ Other (Describe):			
Which Homebuyer Education Class will	you be attending? (Ch	eck One):	
□ Jan □Feb □Mar □Apr □N	1ay □Jun □Jul	□Aug □Sep [□Oct □Nov
How did you hear about us?			
Brochure Workshop Flyer			
🗆 Radio Ad 🛛 🗆 Real Estate Agent	🗆 USDA 🛛 Web	osite 🛛 Social Me	edia Ad 🛛 🗆 Word of Mouth
Do you receive Section 8 Rental Assistan	ce? 🗆 No 🗀 Yes If yes	s, when did assistance	e begin?
Have you applied for Section 8 Assistance	e through VSHA (Verm	iont State Housing Ai	uthority)? □No □Yes
Family/Household Size:	(Please use back p	age if more space is r	equired.)
Dependents:			
Namo			
Name:	Age:		
Name:			
	Age:	Relationship:	
Name:	Age: Age:	Relationship: Relationship:	
Name: Name:	Age: Age: Age:	Relationship: Relationship: Relationship:	
Name: Name: Name: Name: Are there non-dependents who will be lin	Age: Age: Age: Age: Age:	Relationship: Relationship: Relationship: Relationship:	
Name:NAme:NA	Age: Age: Age: Age: ving in the home? □ N	Relationship: Relationship: Relationship: Relationship: Io 🗆 Yes	
Name:Name:Name:Name:Name:Name:Name:Name:Name:Name:Name:Name:Name:Name:	Age: Age: Age: Age: ving in the home? □ N Age:	Relationship: Relationship: Relationship: Relationship: Io	
Name:NAme:	Age: Age: Age: Age: ving in the home? □ N Age: Age:	Relationship: Relationship: Relationship: Relationship: Io	





CUSTOMER EMPLOYMENT

Primary Employer:					
				()	
Street	City	State	Zip Code	(/_	Phone
		🗆 Full Time 🛛 Part Ti	me	/	_/
Title or Job Des	scription			Hire Date	
Gross Monthly Income	(Before Taxes) \$	Anı	nual \$		
Net Monthly Income (A	fter Taxes) \$				
Secondary Employer:					
			())	
Street	City	State	Zip Code		Phone
		🗆 Full Time 🛛 Part Ti	me	/	/
Title or Job Des	scription			Hire Date	
Gross Monthly Income	(Before Taxes) \$	Ani	nual \$		
Net Monthly Income (A	fter Taxes) \$				
		<u>CO-CUSTOMER</u>			
Name:					
	First	MI		Last	
Mailing Address:	Street	City	y	State	Zip Code
Physical Address:					
Home Phone: ()	Street	City	y ie: ()	State	Zip Code
Cell Phone: ()		Email:			
Social Security #:		Birth Date:	/		







Education:	No High School Diploma		 High School Diploma /Equivalent 		🗆 Other (De	□ Other (Describe):		
	Two Year College Degree		□ Bachelor's Degre	e				
	Master's Degree		□ Above Master's	Degree				
Marital Status	: □Single □ Married [∃Civil U	nion 🗆 Divorced 🗆]Widowed	□Separated			
Handicapped o	or Disabled? 🗆 No	□ Ye	es Do you need an ad	commoda	tion?			
Are you Active	e Military? 🛛 No	🗆 Ye	s Veteran?	🗆 No	□ Yes			
		<u>co</u>	-CUSTOMER EMPLO	<u>YMENT</u>				
Primary Emplo	oyer:							
					()			
Street	City		State	Zip	Code	Phone		
			□Full Time □ Part ⁻	Time	/ /			
Title o	r Job Description				Hire Date			
Gross Monthly	Income (Before Taxes)	\$	A	nnual \$				
Net Monthly Ir	ncome (After Taxes) \$							
Secondary Em	ployer:							
					()			
Street	City		State	Zip	Code	Phone		
			□Full Time □ Part ⁻	Гime	//			
Title o	r Job Description			Hire	e Date			
Gross Monthly	Income (Before Taxes)	\$	A	nnual \$				
Net Monthly Ir	ncome (After Taxes) \$							

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ALL HOUSEHOLD INCOME

	Customer	Co-Customer
Type of Income	Monthly Amount	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?

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)

Submitted a Mortgage Application?	Lender/Loan Officer Name & Contact Number
Have a Signed Purchase and Sales?	□Real Estate Agent
Completed Home Inspection?	□Who?
Received Financing Commitment Letter?	□ No □ Yes
Have a Closing/Settlement Agent?	□Who?
Have a Closing Date?	□When?
Other:	

www.ruraledge.org

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

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







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 Rural*Edge* 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:
BuralF	dae NeighhorWorks [®] Homeownershin Center

RuralEdge NeighborWorks Homeownership Center 48 Elm Street, PO Box 259, Lyndonville VT 05851 (802) 535-3555 x1304 Toll Free - (800) 234-0560 Online at ruraledge.org Email at "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
Ethnicity (Select One)	Ethnicity (Select One)
Hispanic or Latino	Hispanic or Latino
Not Hispanic or Latino	Not Hispanic or Latino
Race (Select One or More)	Race (Select One or More)
White	White
American Indian/Alaskan Native	American Indian/Alaskan Native
Native Hawaiian/Other Pacific Islander	Native Hawaiian/Other Pacific Islander
Asian and White	Asian and White
American Indian/Alaskan Native and Black	American Indian/Alaskan Native and Black
Black or African American	Black or African American
□ Asian	□ Asian
American Indian/Alaskan Native and White	American Indian/Alaskan Native and White
Black/African American and White	Black/African American and White
□ Other	□ Other
Gender (Select One)	Gender (Select One)
Male Female	Male Female
Were you born in the United States? \Box Yes \Box No	Were you born in the United States? Yes No
	treet Saint Johnsbury, VT 05819 00.234.0560 TTY 800.253.0191
白	www.ruraledge.org

CHARTERED MEMBER





BUDGET/SPENDING PLAN

You	r Bills and When They are Due	Next Due Date of Bill	Monthly Payment	Amount Past Due	Principal Balance
	Mortgage (1 st)/Rent				
	Mortgage (2 nd)				
	Mortgage (3 rd)				
	Electricity				
	Oil/Wood				
	Other Fuel				
	Home Phone				
	Cell Phone(s)				
	Cable TV/Satellite				
sing	Internet				
Housing	Water/Sewer/Septic				
	Trash				
	Home Repair/Maintenance				
	Insurance (Escrowed? No Yes)				
	Property Taxes (Escrowed? 🗆 No 🗆 Yes)				
	Cleaning Supplies				
	Lawn Care				
	Other:				







BUDGET/SPENDING PLAN					
Your Bi	ills and When They are Due	Next Due Date of Bill	Monthly Payment	Amount Past Due	Principal Balance
	Groceries				
	Lunches – Including School				
р	Easting Out				
Food	Snacks				
	Other:				

	Vehicle #1			
_	Vehicle #2			
rtatio	Gas			
Transportation	Car Insurance			
Т	Car Repairs/Tires			
	Public Transportation			
	Other:			
	Credit Card #1			
	Credit Card #2			
Other	Credit Card #3			
Credit, Loans, Savings, & Other	Loan #1			
	Loan #2			
	Loan #3			
redit,	Savings for Retirement			
0		1	1	

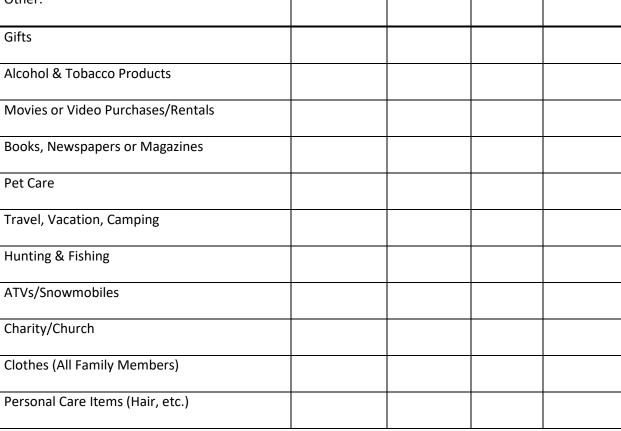






BUDGE	T/SPENDING PLAN				
Your B	ills and When They are Due	Next Due Date of Bill	Monthly	Amount Past Due	Principal Balance
	Health Insurance Premium		Payment	Past Due	Balance
	Medical/Dental Co Pay				
Health	Prescriptions				
Hea	Over the Counter Medications				
	Other:				
	Child Care				
	Activities & Sports				
Children	School Costs				
	Toys, Books, Games, Etc.				
	Other:				
	Gifts				

Luxury Items





1222 Main Street Saint Johnsbury, VT 05819 Phone: 800.234.0560 TTY 800.253.0191

www.ruraledge.org

CHARTERED MEMBER



AUTHORIZATION TO RELEASE INFORMATION

Name:	Social Security #:
Name:	Social Security #:
Address:	Phone:

I/We authorize the release of information to and/or from Rural*Edge* 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 Rural*Edge* and the HOC and for Rural*Edge* 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_

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 acquisition, financing, refinancing, retention or repair of housing. This consent is in addition to the release of information as provided for my/our Service Contact 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:	 			

Name:

Date:			
Date.			







RURALEDGE, INC. PRIVACY POLICY AND PRACTICES

Rural*Edge* 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.

Rural*Edge* 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, Rural*Edge* 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 disclosure 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.







RURALEDGE, INC. 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 subpoenas, and to credit bureaus.

In material intended for public distribution, such as newspaper articles, Rural*Edge* 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 Rural*Edge* 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 NeighborWorks[®] Homeownership Center at (802) 535-3555 or toll free at (800) 234-0560 or you can write us at NeighborWorks[®] Homeownership Center, 1222 Saint Johnsbury, VT 05819.







CUSTOMER CONDUCT POLICY

Mission: RuralEdge strengthens Northeast Kingdom communities one home at a time.

Vision: RuralEdge envisions Northeast Kingdom communities where every individual can live in stable, affordable housing with access to the services they need to live a healthy and prosperous life.

RuralEdge values community and its clients and takes its work very seriously. A key component of successfully achieving its mission and vision is respect. Rural Edge staff strive to provide the best in customer service and in return, RuralEdge expects that its staff will be treated with respect and be able to work in an environment free from harassment and threats.

Abusive or violent behavior toward RuralEdge agents or staff includes, but is not limited to, verbal as well as physical abuse or violence, use of racial epithets, or other harsh, threatening, or discriminatory language. All means or forms of communication, written or oral, or physical gestures, that could be customarily used to intimidate may be considered abusive, threatening, or violent behavior.

Harassing behavior refers to the act of repeatedly disturbing, alarming, or threatening someone, to the extent that such conduct either causes harm or results in the person complaining of harassment to reasonably fear that harm may be caused to them. Harassing behavior may also include the electronic dissemination to third parties of personally identifying, embarrassing or inaccurate information about staff/agents. It also includes using the legal system to harass RuralEdge staff/agents through the filing of retaliatory and frivolous complaints with outside, third party governmental entities whether criminal or civil in nature against RuralEdge and/or its staff/agents.

To address this:

- RuralEdge reserves the sole right and discretion to deny or discontinue services or disenroll from • programming, a customer or potential customer if any member of the household has engaged in repeated harassing behavior or has threatened any violence toward RuralEdge's agents or staff as described above.
- Understanding its legal obligation as a landlord, RuralEdge may require property maintenance requests . that are not considered emergency, that have been submitted by tenants who have demonstrated threatening or harassing behavior, to be completed when the household is not present.

Signature Acknowledging Receipt of Policy: _____

Date of Acknowledgement:

Adopted August 2023

Phone: 800.234.0560 TTY 800.253.0191



