

D&E, A Housing & Economic Empowerment Center, Inc.

Email: info@depower.org | Phone: 770-961-6900 | Fax: 77-961-8900



General Intake Form

Primary Applicant Information

Full Name: _____ Date: _____
First Last M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

County: _____ How long have you lived there? _____

Phone: _____ Email: _____

SS# _____ Preferred Language: _____

Race?	American Indian/Alaskan Native <input type="checkbox"/>	Asian <input type="checkbox"/>	Black or African American <input type="checkbox"/>	Native Hawaiian or Other Pacific Islander <input type="checkbox"/>	White <input type="checkbox"/>	Other Multiple Race <input type="checkbox"/>	Other <input type="checkbox"/>
Ethnicity?	Not Hispanic <input type="checkbox"/>	Hispanic <input type="checkbox"/>	Choose Not to Respond <input type="checkbox"/>				
Gender?	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Choose Not to Respond <input type="checkbox"/>				

Do you live in a rural area? Yes No Are you a first-time homebuyer? Yes No

Gross Monthly Income: _____ Annual Household Income: _____

Number in Household: _____ Date of Birth: _____ Disabled? Yes No

Military Service

Veteran? Yes No Active Military? Yes No Choose Not to Respond

Residency Status

US Citizen? Yes No Green Card Holder? Yes No Foreign Born? Yes No

Household Information

Marital Status?	Single <input type="checkbox"/>	Married <input type="checkbox"/>	Divorced <input type="checkbox"/>	Separated <input type="checkbox"/>	Widowed <input type="checkbox"/>	Choose Not to Respond <input type="checkbox"/>
Household Type?	Single Parent <input type="checkbox"/>	Single Adult <input type="checkbox"/>	Unrelated Adults <input type="checkbox"/>	Married with Children <input type="checkbox"/>	Married without Children <input type="checkbox"/>	Other <input type="checkbox"/>
Education Level	Below High School <input type="checkbox"/>	High School Graduate <input type="checkbox"/>	Associate Degree <input type="checkbox"/>	Bachelor's Degree <input type="checkbox"/>	Master's degree <input type="checkbox"/>	Above Master's Degree <input type="checkbox"/>

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General Intake Form Continued

Co-Applicant (If yes, please complete page 3)

Do you have a co-applicant? Yes No

Co-Applicant Name? _____

Additional Services (Please check all that apply)

Are you interested in additional services provided by D&E, A Housing & Economic Empowerment Center, Inc.?

Group Pre-Purchase Workshop <input type="checkbox"/>	1-on-1 Pre-Purchase Counseling <input type="checkbox"/>	1-on-1 Budget Counseling <input type="checkbox"/>	1-on-1 Credit Counseling <input type="checkbox"/>	Group Credit Workshop <input type="checkbox"/>	Lease Purchase Program <input type="checkbox"/>	Mortgage Modification <input type="checkbox"/>
Referral Source:	Bank <input type="checkbox"/>	Government <input type="checkbox"/>	Realtor <input type="checkbox"/>	Staff Member <input type="checkbox"/>	Word of Mouth <input type="checkbox"/>	Internet <input type="checkbox"/>

One-on-One Counseling Information

Have you ever filed for bankruptcy? YES NO BK Type? Chapter 7 Chapter 13

If yes, when was the filing date? _____ Is it Discharged? YES NO Discharge date? _____

Was your mortgage included in the bankruptcy? YES NO

If you are unemployed, when did you become unemployed? _____ Why? _____

Primary Source of Income: _____ Title: _____ Start Date: _____

Secondary Source of Income: _____ Title: _____

Do you expect your household income to change in the next 2-3 months? If yes, please briefly explain in the space below:

Disclaimer and Signature

All the information that I/We provided in this worksheet is correct and factual. No information has been withheld. I/We understand the understand the necessity for accurate and complete information in obtaining a favorable resolution. I/We will provide any needed information to assist the Housing Counselor. I/We understand that deliberately providing inaccurate information or an unwillingness to timely provide the Counselor with the necessary information or documents to assist us can result in an adverse outcome. It will also result in closing our file and no further assistance from the Counselor will be provided.

Primary Applicant: _____ Date: _____

Co-Applicant: _____ Date: _____

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General Intake Form (Co-Applicant)

Co-Applicant Information

Full Name: _____ Date: _____
First Last M.I.

Address: _____
Street Address (If different for co-applicant) Apartment/Unit #

City State ZIP Code

County: _____ How long have you lived there? _____

Phone: _____ Email: _____

SS# _____ Preferred Language: _____

Education Level?	Below High School <input type="checkbox"/>	High School Graduate <input type="checkbox"/>	Associate Degree <input type="checkbox"/>	Bachelor's Degree <input type="checkbox"/>	Master's degree <input type="checkbox"/>	Above Master's Degree <input type="checkbox"/>	
Race?	American Indian/Alaskan Native <input type="checkbox"/>	Asian <input type="checkbox"/>	Black or African American <input type="checkbox"/>	Native Hawaiian or Other Pacific Islander <input type="checkbox"/>	White <input type="checkbox"/>	Multiple Race <input type="checkbox"/>	Other <input type="checkbox"/>
Ethnicity?	Not Hispanic <input type="checkbox"/>	Hispanic <input type="checkbox"/>	Choose Not to Respond <input type="checkbox"/>				
Gender?	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Choose Not to Respond <input type="checkbox"/>				

Do you live in a rural area? Yes No Are you a first-time homebuyer? Yes No

Gross Monthly Income: _____ Annual Household Income: _____

Number in Household: _____ Date of Birth: _____ Disabled? Yes No

Military Service

Veteran? YES NO Active Military? YES NO Choose Not to Respond

Residency Status

US Citizen? YES NO Green Card Holder? YES NO Foreign Born? YES NO

Disclaimer and Signature

All the information that I provided in this worksheet is correct and factual. No information has been withheld. I understand the understand the necessity for accurate and complete information in obtaining a favorable resolution. I/We will provide any needed information to assist the Housing Counselor. I understand that deliberately providing inaccurate information or an unwillingness to timely provide the Counselor with the necessary information or documents to assist us can result in an adverse outcome. It will also result in closing our file and no further assistance from the Counselor will be provided.

Signature: _____ Date: _____

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Conflict of Interest and Disclosure

About Us and Program Purpose: D&E is a nonprofit, HUD-approved comprehensive housing counseling agency. We provide education workshops and a full spectrum of housing counseling including pre-purchase, foreclosure prevention, non-delinquency post-purchase, reverse mortgage, rental and homeless counseling. 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.). The client understands that it will NOT be the responsibility of the counselor to fix the problem for me/us, but rather to provide guidance and education to empower me/us in fixing those issues preventing affordable mortgage financing.

Counselor's Roles and Responsibilities	Client's Roles and Responsibilities
<ul style="list-style-type: none"> Reviewing your housing goal and your finances; which include your income, debts, assets, and credit history. Preparing a Client Action Plan that lists the steps that you and your counselor will take in order to achieve your housing goal. Preparing a household budget that will help you manage your debt, expenses, and savings. Your counselor is not responsible for achieving your housing goal but will provide guidance and education in support of your goal. Neither your counselor nor D&E employee's agents, nor directors may provide legal or tax advice. 	<ul style="list-style-type: none"> Completing the steps assigned to you in your Client Action Plan. Providing accurate information about your income, debts, expenses, credit, and employment. Attending appointments, returning calls, providing requested paperwork in a timely manner. Notifying D&E or your counselor when changing your housing goals. Attending educational workshop(s) (i.e. pre or post-purchase counseling workshop) as recommended. Retaining an attorney if seeking legal advice and/or representation in matters such as foreclosure or bankruptcy protection.
<p>Termination of Services: Failure to cooperate (not returning documents and calls, not following action plan) with your housing counselor and/or D&E will result in discontinuation of counseling services. This includes, but is not limited to, missing three consecutive appointments.</p>	

Agency Conduct: No D&E 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.

Agency Relationships: D&E has both financial and non-financial affiliations with HUD, NeighborWorks America, Freddie Mac, Fannie Mae, HomeFree USA, GA Dept. of Community Affairs, Metro Fair Housing, DeKalb County Community Development Department, Mississippi Home Corporation, Spring Four, Community Achievement Center, Georgia Act, and banks including: Atlantic Capital Bank, Bank of America, Wells Fargo, JP Morgan Chase, RBC Bank, United Community Bank and others. As a housing counseling program participant, you are not obligated to use the products and services of D&E or our industry partners.

Alternative Services, Programs, and Products & Client Freedom of Choice: Alternative Services, Programs, and Products & Client Freedom of Choice: D&E has Pre-Purchase One-on-One Counseling, Fair Housing Pre-Purchase Education Workshops, Predatory Lending Education Workshop, Mortgage Delinquency and Default Resolution One-On-One Counseling, Resolving/Prevention Mortgage Delinquency Workshops, Financial Management/Budget One-On-One Counseling for Homeowners. However, you are not obligated to participate in this or other D&E programs and services while you are receiving housing counseling from our agency. However, you are not obligated to participate in this or other D&E programs and services while you are receiving housing counseling from our agency. You may consider seeking alternative products and services from other HUD Approved Housing Counseling Agencies by visiting HUD.gov. You are entitled to choose whatever real estate professionals, lenders, and lending products that best meet your needs.

Referrals and Community Resources: You will be provided a community resource list which outlines the county and regional services available to meet a variety of needs, including utilities assistance, emergency shelter, transitional housing, food banks, and legal aid assistance. This list also identifies alternative agencies that provide services, programs, or products identical to those offered by D&E and its exclusive partners and affiliates.

Privacy Policy: I/we acknowledge that I/we received a copy of D&E's Privacy Policy [redacted] / _____
Initials

Furthering Fair Housing: I/we acknowledge that I/we received and read a copy of D&E's Fair Housing Info. [redacted] / _____
Initials

Errors and Omissions and Disclaimer of Liability: I/we agree D&E, its employees, agents, and directors are not liable for any claims and causes of action arising from errors or omissions by such parties, or related to my participation in D&E counseling; and I hereby release and waive all claims of action against D&E and its affiliates. I have read this document, understand that I 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.

Quality Assurance: In order to assess client satisfaction and in compliance with grant funding requirements, D&E, or one of its partners, may contact you during or after the completion of your housing counseling service. You may be requested to complete a survey asking you to evaluate your client experience. Your survey data may be confidentially shared with D&E grantors such as HUD or NeighborWorks America.

I/we acknowledge that we have received, reviewed and agree to D&E's Program Disclosures.

Client Signature

Date

Client Signature

Date

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Privacy Policy

D&E, A Housing & Economic Empowerment Center, Inc. is committed to assuring the privacy of individuals and/or families who have contacted us for assistance. We realize that the concerns you bring to us are highly personal in nature. We assure you that all personal information shared orally and/or in writing will be managed within ethical and legal considerations. Your “nonpublic personal information,” such as your total debt information, income, living expenses and personal information concerning your financial circumstances, will be provided to creditors, program monitors, and others only with your authorization. We may also use anonymous aggregated case file information for the purpose of evaluating our services, gathering valuable research information and designing future programs.

What personal information does D&E collect about you?

We collect personal information about you from the following sources:

- Information that you provide on applications, forms, email, or verbally
- Information about your transactions with us, our affiliates, or others
- Information we receive from your creditors or employment references
- Information we receive from a credit reporting agency, such as your credit history.

What categories of information do we disclose and to whom?

We may disclose the following personal information to financial service providers (such as companies providing home mortgages), Federal, State, and nonprofit partners for program review, monitoring, auditing, research, and/or oversight purposes, and/or any other pre-authorize individual and/or organization. The types of information we disclose are as follows:

- Information you provide on applications/forms or other forms of communication. This information may include your name, address, Social Security Number, employer, occupation, account numbers, assets, expenses and income.
- 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; we do not sell or rent your personal information to any outside entity.
- We may share anonymous, aggregated case file information; but this information may not disclose in any manner that would personally identify you in any way. This is done in order to evaluate our program, gather valuable research information, and/or design future programs.
- We may also disclose personal information about you to third parties as permitted by law.

How is your personal information secured?

We restrict access to your nonpublic personal information to D&E employees who need to know that information in order to perform their housing counseling duties. We maintain physical, electronic, and procedural safeguards that comply with federal regulations to guard your nonpublic personal information; and we train our staff to safeguard client information and prevent unauthorized access, disclosure, or use.

Opting Out of Certain Disclosures

You may direct D&E to *not* disclose your nonpublic personal information to third parties (other than disclosures made to protect partners and those permitted by law). However, if you choose to opt out, we will not be able to answer any questions from your creditors, which may limit D&E’s ability to provide services such as foreclosure prevention counseling or credit restoration counseling. If you choose to opt-out, please check the box next to the “Opt-Out” clause. If you choose to release your information as stipulated in Privacy Policy, check the box next to the “Release” clause. You may change your decision at any time by contacting our agency.

RELEASE: I hereby authorize D&E to release nonpublic personal information it obtains about me to my creditors and any third parties necessary to provide me with the services I requested. I acknowledge that I have read and understand the above privacy practices and disclosures. I acknowledge that I have received a copy of the Privacy Policy.

OPT-OUT: I request that D&E make no disclosures of my nonpublic personal information to third parties other than project partners and those permitted by law. By choosing this option, I understand that D&E will NOT be able to answer any questions from my creditors. I understand that I may change my decision any time by contacting D&E. I acknowledge that I have received a copy of the Privacy Policy.

Client Signature

Date

Client Signature

Date

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Third Party Certification & Authorization Form

Loan #: _____ Servicer _____ (If Applicable)

Primary Applicant

First Name _____ MI _____ Last Name _____
Date of Birth ____/____/____ Age _____ Last 4 Digits of SS#: _____
Address _____ City _____ State _____ Zip Code _____

Co-Applicant

First Name _____ MI _____ Last Name _____
Date of Birth ____/____/____ Age _____ Last 4 Digits of SS#: _____

I hereby authorize D&E, A Housing & Economic Empowerment Center, Inc. and its employees to obtain information from my records in order to assist me in resolving my housing/mortgage related issues. I also authorize D&E and its employees to release information to third parties (institutions, companies and agencies) that our organization believes can provide assistance in resolving housing/mortgage issues. Examples of such entities include mortgage servicers, mortgage investors, public agencies and other nonprofit organizations. If necessary, information on file at another entity may also be released to us. This information release/exchange will be restricted to specific financial data, such as income, budget, debt and mortgage details provided by you.

Financial Capabilities Authorization and Agreement:

1. I understand that D&E provides financial capability counseling/coaching after which I will receive a written action plan consisting of recommendations for handling my finances, possibly including referrals to other agencies as appropriate.
2. I understand that D&E receives Congressional funds through HomeFree-USA for Project Reinvest: Financial Capability program, and, as such, is required to (a) submit client-level information to NeighborWorks America Data Collection System (DCS) for this grant, (b) allow HomeFree-USA and NeighborWorks America to open files to be reviewed for program monitoring and compliance purposes, and (c) allow HomeFree-USA and NeighborWorks America to conduct follow-up with the client related to program evaluation.
3. I understand that I may opt-out of these requirements, but proof of this opt-out must be recorded in my client file.
4. I give permission for Project Reinvest: Financial Capability program administrators and/or their agents to follow-up with me within the next three years for the purposes of program evaluation.
5. I acknowledge that I have received a copy of D&E Privacy Policy.
6. I understand I may be referred to other services of the organization, another 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.
7. I understand 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/We authorize D&E, A Housing & Economic Empowerment Center, Inc. and/or its assigned agents to order a consumer credit report on me/us and discuss my/our current situation with appropriate lenders and other professionals for the purpose of evaluating my/our situation and providing the best solution to my housing/mortgage need. D&E, A Housing & Economic Empowerment Center, Inc. and its agents may obtain any or all documentation or information for helping you obtain your housing/mortgage goals/assistance. I understand that Local, State, or Federal Regulations may protect this information. I may revoke this authorization as it applies to any information protected by Federal Regulation at any time, but not to the extent action has been taken in reliance on it. I know that I have a right to get a copy of this form. A photocopy of this form will be as valid as the original. **This form will be valid for two years from the date shown.**

Disclaimer: The counseling services and other forms of assistance that may be offered by D&E, its subsidiaries, affiliates or directors, officers, employees, agents or partners may also be offered by other providers and you are under no obligation to utilize services from D&E regardless of the recommendations made by counselors.

Primary Applicant Signature _____ Date: _____

Co-Applicant Signature _____ Date: _____

Counselor Name: _____ Date: _____

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Action Plan

Completed by D&E Client

Full Name: _____ Date: _____
First Last M.I.

Client Goal: _____

Counselor Strategies:

1. _____
2. _____
3. _____

Completed by D&E Counselor

Counselor Name: _____

Financial Assistance Summary:	Current Mortgage (If Applicable)	Rent vs Buy Analysis Performed?
Total Gross Monthly Income: \$ _____	Year Purchased _____	Housing Desired: _____ (specifically, house, condo, etc.)
Monthly Mortgage/Rent: \$ _____	Current Value \$ _____	Location (city, state, zip) _____
Housing Ratio %: _____	Loan Balance \$ _____	
Net Monthly Income: \$ _____	Equity \$ _____	
Total Monthly Expenses: \$ _____	Current Rate _____	
Monthly Debt Obligations: \$ _____	Property Condition <i>(Circle One)</i>	Avg. Purchase Price \$ _____
Discretionary Income Amt: \$ _____	Needs Repair Fair Good Excellent	Typical Mortgage Payment \$ _____
DTI % _____		Typical Rent Payment \$ _____

Counselor Assessment

Is this Goal: Ready Short Term <3 months | Near Ready 3 – 6 months | Long Term 6+ months

Counselor Strategies:

1. _____
2. _____
3. _____

Counselor Tasks with Timelines:

1. _____
2. _____
3. _____

Community Referral List Provided:

Community Agency Name: _____ Website: _____ Phone: _____

Community Agency Name: _____ Website: _____ Phone: _____

Notes: _____

Next Appointment Date (if any): _____

Follow Up Information

All the information that I/We provided in this worksheet is correct and factual.

Client Signature: _____ Date: _____

Household Budget Worksheet



Record income, expenses and disposable income. Do not include any money deducted from your take home pay.

Monthly Take Home Income		Monthly Living Expenses		Monthly Living Expenses Cont.	
Salary/Wages/Business Draw		Alimony / Child Support		Life and Disability Insurance	
Salary or Wages (Spouse)		Child Care		Homeowner/Condo Assoc. Fees	
Social Security		Children's Activities		H.O./Rental Insurance	
Pension/Retirement		Tuition and School Supplies		Property Taxes	
Interest on Accounts		Auto Gas		Charitable Contributions	
Alimony / Child Support		Auto Insurance		Clothing Services (Dry Clean)	
Real Estate Rent (income)		Cable TV/Satellite Fees		Clothing Purchases	
Investment Dividends		Telephone (Home, Cell)		OTHER:	
Unemployment / Food Stamps		Internet Access		Total Monthly Living Expenses	
Other:		Electric Bill		Assets	
Total Take Home Income		Gas & Oil Bill		Description	Value
Monthly Secured Debts Payment		Water Bill		Cash on Hand	
1st Mortgage		Trash Disposal		Checking Account	
2nd Mortgage		Property Service (Lawn, Pool)		Saving Account	
Land Lease (Trailer Park, other)		Security Services (Alarm)		Anticipated Tax Refund	
Student Loans		Food (In-Home / Groceries)		IRA/Keogh Accounts	
Auto Loans/Leases		Meals (Out)		Stocks/Bonds/CD's/Annuities...	
Recreation (boat, TV, etc.)		Prescriptions		OTHER:	
Past Due Taxes		Household Items			
Other Debts (not Credit Cards)		Personal Care (Grooming)			
Other Loans (not Credit Cards)		Memberships			
Total Secured Debts		Health and Dental Insurance			
Unsecured Debt (Monthly Payment)					
Details	Interest Rate	Monthly Payment	Balance	In Collections	Past Due
Credit Card 1					
Credit Card 2					
Credit Card 3					
Credit Card 4					
Credit Card 5					
Personal Loan 1					
Personal Loan 2					
Medical Bill Payment					
Other: _____					
SUMMARY					
Total Take Home Income (+)					
Total Living Expenses (-)					
Total Secured Debt (-)					
Total Unsecured Debt (-)					
Disposable Income **					



Fair Housing: It's the Law!

The Georgia Fair Housing Act prohibits discrimination in housing and housing-related activities because of a person's:

- Race
- Sex
- Color
- Familial Status (children under 18)
- National Origin
- Disability or Handicap
- Religion

This law was passed to ensure that the citizens of Georgia are able to compete for housing on a fair and equitable basis in keeping within their economic means.

What is prohibited?

Housing discrimination can occur in a variety of ways. Listed below are some housing practices that are considered illegal

If they are based on a home seeker's race, color, national origin, sex, religion, familial status, or disability.

- Refusing to rent or sell a house.
- Falsely denying that a house is available for inspection, sale, or rent.
- Offering different terms, conditions, or privileges for certain people.
- Intimidating, interfering with, or coercing people to prevent them from buying or leasing a dwelling.
- Advertising or posting notices about the sale or rental of a dwelling where the ad or notice indicates preference, limitation, or discrimination.
- Discriminating against someone through financing or broker's services.
- "Steering" of clients by real estate agents to or from certain neighborhoods and of tenants by landlords to or from certain areas of the complex.

Do you think your rights have been violated?

If you think your fair housing rights have been violated, you may write, fax, or telephone the Georgia Commission on Equal Opportunity (GCEO) with your complaint. You have one year after an alleged violation to file a complaint, but you should file it as soon as possible.

Georgia Commission on Equal Opportunity

2 Martin Luther King Jr. Drive, S.E.
Suite 1002 – West Tower
Atlanta, Georgia 30334
Atlanta Contact: 404-656-1736
Georgia Contact: 800-473-OPEN
Fax: 404-656-4399
Se hablo Español

Once made aware of discriminatory practices, the GCEO will:

1. Investigate the complaint.
2. Collect relevant facts and data and interview parties and witnesses.
3. Assist both parties in reaching an agreement.
4. Make a determination based on the investigation findings.

I acknowledge that I've received and read the Fair Housing info.

Client Signature: _____

Date: _____