



**Information for government monitoring**

**purposes:**

**Applicant:**

**Race (Circle One):**

White Black Asian/Pacific Islander  
American Indian/Alaska Native Other

**Ethnicity (Circle One):** Hispanic Not Hispanic

**Foreign Born (Circle One):** Yes No

**Veteran (Circle One):** Yes No

**Marital Status (Circle One):**

Divorced Married Separated Single  
Other Widowed

**Education (Circle One):**

Unknown Below HS Diploma HS or Equal  
2 years College Bachelor Master  
Above Masters

**Co-Applicant:**

**Race (Circle One):**

White Black Asian/Pacific Islander  
American Indian/Alaska Native Other

**Ethnicity (Circle One):** Hispanic Not Hispanic

**Foreign Born (Circle One):** Yes No

**Veteran (Circle One):** Yes No

**Marital Status (Circle One):**

Divorced Married Separated Single  
Other Widowed

**Education (Circle One):**

Unknown Below HS Diploma HS or Equal  
2 years College Bachelor Master  
Above Masters

**Part 3: Other Household Member Information**

List information for all other household members residing at the same residence:

<u>Last Name</u>	<u>First Name</u>	<u>Date of Birth</u>	<u>Disabled</u>	<u>Relationship</u>
_____	_____	_____	Yes / No	_____
_____	_____	_____	Yes / No	_____
_____	_____	_____	Yes / No	_____
_____	_____	_____	Yes / No	_____
_____	_____	_____	Yes / No	_____
_____	_____	_____	Yes / No	_____
_____	_____	_____	Yes / No	_____
_____	_____	_____	Yes / No	_____

Total Number People Household (applicants plus other household member) =

**Part 4: Household Income**

Applicant's Annual Income: \$ \_\_\_\_\_ Employer/Source \_\_\_\_\_

Co-Applicant's Annual Income: \$ \_\_\_\_\_ Employer/Source: \_\_\_\_\_

Other Household Member Income: \$ \_\_\_\_\_ Employer/Source: \_\_\_\_\_

Other Income: \$ \_\_\_\_\_ Employer/Source: \_\_\_\_\_

Total Income: \$ \_\_\_\_\_



### Part 5: Authorization for City of Kankakee-CDA To Verify Information

I/We verify that the information on this application is true and complete to the best of my knowledge and belief. I consent to the release of such information in order to qualify for City of Kankakee-CDA Program(s). I understand that providing false information or providing false statements may be grounds for denial of my application. I agree to provide verification of all income and assets as required by City of Kankakee-CDA. I further authorize disclosure of all information that will verify my income and assets. Furthermore, I agree to complete the assigned budget worksheet.

I/We authorize the release of information requested by City of Kankakee-CDA in order to verify our eligibility for assistance and/or any other services offered by City of Kankakee-CDA. This information may include inquiries about credit history, rental history, employment, income, pensions, assets, federal, state or local benefits, family composition, social security, residence history, etc.

I/We further grant permission to City of Kankakee-CDA to contact social services, financial institutions, landlords, employers, credit bureaus, courts, realtors, and other sources of information in order to facilitate our participation in services or programs available through City of Kankakee CDA.

I/We further authorize the sharing of information, including but not limited to such documents as the Offer to Purchase, Loan Application, Third-Party Home Inspection and Appraisal, Verification of Human Services, Verification of Disability, with social service agencies, financial institutions, real estate professionals, courts and attorneys and other agencies as listed in this application.

I/We understand that City of Kankakee-CDA may charge fees for its programs as follows:

**Housing Counseling Classes: \$95 per individual/\$150 per couple (A \$25 processing fee or payment in full is required with application. If a scholarship is received, fee will be returned upon completion of group counseling session. If no scholarship is received, fee will be applied to total price.)**

City of Kankakee-CDA is committed to assuring the privacy of individuals and/or families who have contacted us for assistance. We assure you that all information shared both orally and in writing will be managed within legal and ethical considerations. We may use aggregated case file information for the purpose of evaluating our services, gathering valuable research information and designing future programs.

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

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Applicant's Signature

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Co-Applicant's Signature

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Date

---

Date



### CLIENT'S AUTHORIZATION FORM

I/We hereby authorize City of Kankakee-CDA, to discuss pertinent information relating to credit history, past and present employment earning records, bank accounts, stock holdings, social security disability and benefits, and any other related assets that are needed to receive homeownership counseling. I/We further authorize City of Kankakee-CDA to receive and/or know any documents and/or actions relating to our file. It is understood that a photocopy of this form will also serve as authorization. The information the agency obtains is only to be used in the homeownership program.

\_\_\_\_\_  
Client

\_\_\_\_\_  
Date

\_\_\_\_\_  
Client

\_\_\_\_\_  
Date

### CITY OF KANKAKEE-CDA CLIENT CONTACT PERMISSION FORM

City of Kankakee-CDA welcomes the opportunity to have helped you learn about the process of purchasing a home through its homebuyer education program. We would like to stay in contact with you to continue sharing information about homeownership, community events, City of Kankakee-CDA news, etc. Please indicate that you would be willing to be on our email distribution list by completing the following information. If you would rather not be on our distribution list, just check the box to the right.

Opt Out:

I hereby give City of Kankakee-CDA permission to send me the City of Kankakee-CDA newsletter and upcoming event notices via email.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Email Address



## Pre-Purchase Agency Disclosure Form

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.

City of Kankakee-CDA is a nonprofit, Neighborworks-approved comprehensive housing counseling agency. We provide education and workshops specifically designed for housing 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.). As a housing counseling program participant, please affirm your roles and responsibilities along with the following disclosures and initial, sign, and date the form on the following page.

City of Kankakee-CDA employees, agents, or directors may NOT provide legal advice.

### **Client's Roles and Responsibilities:**

1. Providing accurate information about your income, debts, expenses, credit and employment.
2. Attending meetings, returning calls, providing requested paperwork in a timely manner.
3. Attending Class 1 and Class 2 of Homebuyer Education.
4. Retain an attorney if seeking legal advice and/or representation in matters such as foreclosure or bankruptcy protection.
7. I/We, the client(s), understand that failure to work cooperatively with my housing counselor and/or City of Kankakee-CDA will result in the discontinuation of counseling services. This includes, but not limited to, missing phone or in person appointments.

As a housing counseling program participant, you are not obligated to receive, purchase or utilize any other products and services of City of Kankakee-CDA, including but not limited to renting property or purchasing real estate owned by City of Kankakee-CDA, or our industry partners in order to receive housing counseling services.

**Alternative Services, Programs, and Products & Client Freedom of Choice:** You are entitled to choose whatever real estate professionals, lenders, and lending products that best meet your needs.

**Privacy Policy:** City of Kankakee-CDA 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 information shared both orally and in writing will be managed within legal and ethical 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 and signature on the Program Intake Form. We may also use anonymous aggregated case file information for the purpose of evaluating our services, gathering valuable research information and designing future programs.



## Pre-Purchase Agency Disclosure Form (cont.)

### **Types of information that we gather about you:**

- Information we receive from you orally, on applications or other forms, such as your name, address, social security number, assets, and income;
- Information about your transactions with us, your creditors, or others, such as your account balance, payment history, parties to transactions and credit card usage; and
- Information we receive from a credit reporting agency, such as your credit history.

### **Release of your information to third parties:**

- We may also disclose any nonpublic personal information about you or former customers to anyone as permitted by law (e.g., if we are compelled by legal process).
- Within the organization, we restrict access to nonpublic personal information about you only to those employees who need to know that information to provide services to you.

**Errors and Omissions and Disclaimer of Liability:** I/We agree City of Kankakee-CDA, 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 City of Kankakee-CDA counseling; and I/we hereby release and waive all claims of action against City of Kankakee-CDA. I/We have read this document, understand that I/we 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, City of Kankakee-CDA, 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 City of Kankakee-CDA grantors such as HUD or NeighborWorks America. I/We acknowledge that I/we received, reviewed, and agree to City of Kankakee-CDA Pre-Purchase Agency Disclosures.

\_\_\_\_\_  
Client

\_\_\_\_\_  
Date

\_\_\_\_\_  
Client

\_\_\_\_\_  
Date