



CALCASIEU PARISH HOUSING COUNSELING EDUCATION APPLICATION

Applicant Name _____

Current Address _____ Apt No: _____

City, State, Zip Code _____

Home Phone _____ Work # _____ Cellular # _____

E-Mail: _____ Fax #: _____

Do you Have Limited English Proficiency? Yes No

Do you live in a Rural Area? Yes No

HOUSEHOLD COMPOSITION AND CHARACTERISTICS

List the Head of Household and all other members who will be living in the unit.

MEMBER'S FULL NAME	ETHNICITY	MARITAL STATUS	BIRTH DATE	SEX	SOCIAL SECURITY #

Total Number of Household Members: _____

Race: Please check

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

Handicapped? Yes No

First Time Homebuyer? Yes No

ADDITIONAL INFORMATION:

What is your Total Annual Income? _____

Have you owned a home in the last three (3) years? Yes No

What is your highest level of Education completed? _____

AUTHORIZATION:

I authorize Calcasieu Parish Housing Department to: refer my file to a lender to pull my/our credit report in connection with my pursuit of a loan to purchase a home; to review my/our credit file for housing counseling in connection with my pursuit of a loan to purchase a home; pull my/our credit report and review my/our credit file for informational inquiry purposes.

I/We understand that any intentional or negligent representation (s) of the information contained on this form may result in civil liability and/or criminal liability under the provisions of Title 18, United States Code, Section 1001.

Applicant

Date

Housing Counseling Agreement

- ❖ I understand that Calcasieu Parish Housing Counseling Department (CPHC) provides confidential pre-purchase & post-purchase housing counseling after which I will receive a written action plan consisting of recommendations for handling my credit and finances, possibly including referrals to other agencies as appropriate.
- ❖ I understand CPHC is a non-profit housing counseling department that is in partnership with my lenders, servicer or insurer and may require that CPHC department share my information with my servicer to better assist me. I authorize my lender, servicer or insurer to share my information with CPHC. Funding comes from HUD, lender partners, and private foundations.
- ❖ I may be referred to other services, 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.
- ❖ A counselor may answer questions and provided information but not give legal advice. If I want legal advice, I will be referred for appropriate assistance.
- ❖ I understand that CPHC provides information and education on numerous loan products and I further understand that the housing counseling I receive from CPHC in no way obligates me to choose any of these particular loan products.

Housing Counseling Program Disclosure Form

Calcasieu Parish Housing Department provides housing counseling to anyone, regardless of income, at no charge to you. Housing Counseling is offered in the Parish Housing Department but is not related in any way to the Housing Choice Voucher Program or any other programs within that agency. Housing counseling participants are under no obligation to participate in any other service offered by Calcasieu Parish Housing Department.

Purpose:

I/We understand that the purpose of Calcasieu housing counseling program is to provide one-on-one counseling to help customers with their housing needs at no cost to me/us.

The counselor may help analyze my/our financial and credit situation, identify barriers to affordable mortgage financing and other housing problems and develop a plan to remove barriers. The counselor may also provide assistance in debt management by helping me/us prepare a monthly, manageable budget and spending plan. I/We understand that it will not be the responsibility of the counselor to “fix” the problem, but rather to provide guidance and education which may enable me/us to resolve my/our personal financial challenges.

Homeownership Education Workshop:

I understand that as part of the housing counseling program, I/we will be required to attend one of the homeownership education workshops and attendance and completion of the workshop does not guarantee that I/we will receive any grant funds or mortgage financing from any source. I/We understand that every effort will be made to provide me/us with accurate and complete information.

Mortgage Finance Assistance:

The housing counselor may help to identify those loan and downpayment assistance programs that best fit my/our needs. The housing counselor will not recommend **realtors** or any one lender, but may offer a list of lenders that provide assistance programs that may benefit my/our household. The housing counselor does not guarantee that completion of this program will assure qualification for a mortgage or any assistance program.

Customers Responsibility:

I/We understand that it is my/our responsibility to work cooperatively with the housing counselor and actively participate in the process and that failure to do so will result in the discontinuation of my/our counseling. This includes, but is not limited to missing two consecutive appointments.

Applicant Signature

Date

Housing Counselor Signature