Congratulations on taking the first steps toward becoming a homeowner! Thank you for your interest in our Home Buyer Education and Counseling Program. We take great pride in the success of the program, which helps empower our communities through education. This is a very exciting time for you, and we look forward to helping you through the entire home buying process!

The following documentation must be received prior to your appointment:

1. Completed Application signed and dated with the disclosure forms

2. Proof of Income:
   - Most recent paystubs reflecting the last 60 days
     1. (9) Pay stubs Weekly
     2. (6) Pay stubs Bi-Weekly
     3. (4) Semi-Monthly
     4. (2) Monthly
   - All documentation from Social Security for all household members 18yrs & older.

3. 2 years’ tax returns if self-employed (if applicable) & most recent Profit & Loss Statement

4. Last two months of complete bank statements from all open accounts (All Pages)

5. Credit Report Fee $24.01 for each applicant or a copy of a TRIMERGE credit report (score’s included) dated within the last 30 days (We accept Cash, Check, Money Order or online www.tampabaycdc.com)

You may send the documentation to our office via mail, e-mail, fax, or hand-delivery.

**DO NOT SEND ORIGINAL DOCUMENTS**
**YOUR APPOINTMENT WON’T BE SCHEDULED UNTIL ALL THE REQUIRED DOCUMENTATION IS RECEIVED**

Sincerely,

Tampa Bay Community Development Corporation
Tampa Bay Community Development Corporation
Housing Counseling Services
Phone: (727) 442-7075 • Fax: (727) 446-8727
www.tampabaycdc.org
A Non-Profit, HUD-Approved Housing Counseling Agency

☐ Pre-Purchase Homebuyer Counseling  ☐ Credit Repair  ☐ Budget  Date of Appointment: _____________
☐ Post-Purchase Counseling  Rec’d Date:  
ID#

APPLICANT INFORMATION
Applicant Name: ____________________________________________________________
Current Address: ____________________________________________ City/ Zip: ________________
(P.O. Box Not Accepted)
Name of Apartment Complex (if applicable): __________________________________________
Marital Status: □ Single  □ Engaged  □ Married  □ Divorced  □ Widowed
Race/National Origin: □ American Indian/Alaskan  □ African American  □ Asian American  □ White  □ Other
Ethnicity: □ Hispanic/Latino  □ Not Hispanic/Latino  □ Other
Gender: □ Male  □ Female  Head of Household: □ Yes  □ No  Active Military □  Veteran □  Disable □
Age: _____ Date of Birth: ___________ Household Size: ___ Number of Adults: ____ Number of Children: ____
Home Phone: _________________ Cell Phone: ____________________ Work Phone: ________________
E-mail: ____________________________ How Did You Hear about Us? __________________________

CO-APPLICANT INFORMATION
Co-Applicant Name: ____________________________________________________________
Current Address: ____________________________________________ City/ Zip: ________________
(If same as above, list “Same”)
Name of Apartment Complex (if applicable): __________________________________________
Marital Status: □ Single  □ Engaged  □ Married  □ Divorced  □ Widowed
Race/National Origin: □ American Indian/Alaskan  □ African American  □ Asian American
Active Military □  Veteran □  Disable □
Age: _____ Date of Birth: ___________ Household Size: ___ Number of Adults: ____ Number of Children: ____
Home Phone: _________________ Cell Phone: ____________________ Work Phone: ________________
E-mail: ____________________________ How Did You Hear about Us? __________________________

10/03/19
RENTAL INFORMATION

Rent Amount $__________ How long at present address? __________ Do you have a lease? __________ Exp. Date__________

EMPLOYMENT INFORMATION

Applicant:
Name of Employer: ___________________________ Position: ___________________________
Gross Annual Income $________________________ Dates of Employment: ___________________

Co-Applicant:
Name of Employer ___________________________ Position ___________________________
Gross Annual Income $________________________ Dates of Employment ___________________

Other Household Income:
Name of Recipient ___________________________ Source ___________________________
Gross Annual Income $________________________

Other Household Income
Name of Recipient ___________________________ Source ___________________________
Gross Annual Income $________________________

Total Gross Household Income: $__________ □ hourly □ weekly □ bi-weekly □ monthly □ yearly
(Include all sources of income: Salary, SSI/SSD, Unemployment, Child Support, etc. from ALL household members.)

HOUSEHOLD MEMBERS

<table>
<thead>
<tr>
<th>First Name</th>
<th>Last Name</th>
<th>Relationship to Applicant</th>
<th>Age</th>
<th>Annual Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.) ________</td>
<td>________</td>
<td>__________________________</td>
<td>_____</td>
<td>_____________</td>
</tr>
<tr>
<td>2.) ________</td>
<td>________</td>
<td>__________________________</td>
<td>_____</td>
<td>_____________</td>
</tr>
<tr>
<td>3.) ________</td>
<td>________</td>
<td>__________________________</td>
<td>_____</td>
<td>_____________</td>
</tr>
<tr>
<td>4.) ________</td>
<td>________</td>
<td>__________________________</td>
<td>_____</td>
<td>_____________</td>
</tr>
<tr>
<td>5.) ________</td>
<td>________</td>
<td>__________________________</td>
<td>_____</td>
<td>_____________</td>
</tr>
</tbody>
</table>

I CERTIFY THIS INFORMATION TO BE TRUE AND CORRECT

Applicant's Signature _____________________________ Date __________ Co-Applicants Signature _____________________________ Date __________

FOR TAMPA BAY CDC USE ONLY

MFI CALCULATION:
HH SIZE ______________ TOTAL HH INCOME $ ______________ MFI ___________
GROSS ______________ NET ______________

FUNDING SOURCE:
□ Pinellas County □ City/St. Pete □ City/Clearwater □ City/Largo
□ FHFC □ HUD □ Other __________________________

10/03/19
# MONTHLY INCOME AND EXPENSES

**Buyer:** ________________________________  **Date:** __________

**Co-Buyer:** ______________________________

<table>
<thead>
<tr>
<th>Net Monthly Income</th>
<th>Monthly Expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Member 1</strong></td>
<td><strong>Member 2</strong></td>
</tr>
<tr>
<td>Actual</td>
<td>Car Loan 1</td>
</tr>
<tr>
<td>Rent or Mortgage</td>
<td>Car Loan 2</td>
</tr>
<tr>
<td>Salary</td>
<td>Car Insurance</td>
</tr>
<tr>
<td>2nd Lien</td>
<td>Gasoline</td>
</tr>
<tr>
<td>Overtime / Part-time</td>
<td>Child Care</td>
</tr>
<tr>
<td>HOA</td>
<td>Alimony / Child Support</td>
</tr>
<tr>
<td>Electric</td>
<td>Life Insurance</td>
</tr>
<tr>
<td>Water / Sewer / Trash</td>
<td>Groceries</td>
</tr>
<tr>
<td>Cell Phone</td>
<td>Eating Out</td>
</tr>
<tr>
<td>Cable / Internet / Phone</td>
<td>Credit Cards</td>
</tr>
<tr>
<td>Cell Phone</td>
<td>(Minimum Payments)</td>
</tr>
<tr>
<td>Car Loan 1</td>
<td>Rental</td>
</tr>
<tr>
<td>Salary</td>
<td>Student Loans</td>
</tr>
<tr>
<td>Car Insurance</td>
<td>Personal Loans</td>
</tr>
<tr>
<td>Overtime / Part-time</td>
<td>Medical</td>
</tr>
<tr>
<td>Gasoline</td>
<td>(Not Covered)</td>
</tr>
<tr>
<td>Child Care</td>
<td>Entertainment</td>
</tr>
<tr>
<td>Alimony / Child Support</td>
<td>Clothing</td>
</tr>
<tr>
<td>Life Insurance</td>
<td>Pets</td>
</tr>
<tr>
<td>Other Income</td>
<td>Total</td>
</tr>
<tr>
<td>Groceries</td>
<td>Total</td>
</tr>
<tr>
<td>Credit Cards</td>
<td>Deficit / Surplus</td>
</tr>
<tr>
<td>(Minimum Payments)</td>
<td></td>
</tr>
</tbody>
</table>

**Applicant:** ______________________________

**Co-Applicant:** ______________________________

**Counselor:** ______________________________

10/03/19
<table>
<thead>
<tr>
<th>Borrower Name</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Co-Borrower Name</td>
<td></td>
</tr>
<tr>
<td>Property Address</td>
<td></td>
</tr>
<tr>
<td>Client ID</td>
<td></td>
</tr>
<tr>
<td>Fax Number</td>
<td></td>
</tr>
</tbody>
</table>

1. I authorize TAMPA BAY COMMUNITY DEVELOPMENT CORP to submit client-level information to the Florida Housing Finance Corporation, Florida Foreclosure Counseling Program.

2. I authorize the Florida Housing Finance Corporation, and Florida Foreclosure Counseling Program to open files to be reviewed for program monitoring and compliance Purposes.

3. I authorize the Florida Housing Finance Corporation, and Florida Foreclosure Counseling Program to conduct follow-up with me related to program evaluation

________________________________________________________
Borrower Signature                      Date

________________________________________________________
Co-Borrower Signature                   Date

10/03/19
Tampa Bay Community Development Corporation – 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.

About Us and Program Purpose: Tampa Bay Community Development Corporation (Tampa Bay CDC) is a nonprofit, HUD-approved comprehensive housing counseling agency. We provide free education workshops and a full spectrum of housing counseling services including pre-purchase, financial management, budget, credit repair, foreclosure prevention and non-delinquency post-purchase counseling. TBCDC, in partnership with Community Service Foundation, builds rents and sells affordable housing. 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 antidiscrimination 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.

Client and Counselor Roles and Responsibilities:

<table>
<thead>
<tr>
<th>Counselor’s Roles and Responsibilities</th>
<th>Client’s Roles and Responsibilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Reviewing your housing goal and your finances; which include your income, debts, assets, and credit history.</td>
<td>• Completing the steps assigned to you in your Client Action Plan.</td>
</tr>
<tr>
<td>• Preparing a Client Action Plan that lists the steps that you and your counselor will take in order to achieve your housing goal.</td>
<td>• Providing accurate information about your income debts, expenses, credit, and employment.</td>
</tr>
<tr>
<td>• Preparing your household budget that will help you manage your debt, expenses, and savings.</td>
<td>• Attending Meetings, returning calls, and providing requested paperwork in a timely manner.</td>
</tr>
<tr>
<td>• Your Counselor is not responsible for achieving your housing goal, but will provide guidance and education in support of your goal.</td>
<td>• Notifying Tampa Bay CDC or your counselor when changing housing goals.</td>
</tr>
<tr>
<td>• Neither your counselor, nor Tampa Bay CDC employees, agents, or directors may provide legal advice</td>
<td>• Attending education workshop (i.e. pre-purchase counseling workshop) as recommended.</td>
</tr>
</tbody>
</table>

Termination of services: Failure to work cooperatively with your counselor and/or Tampa Bay CDC will result in the discontinuation of counseling services. This includes but is not limited to, missing three consecutive appointments.

Agency Conduct: No Tampa Bay CDC 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: Tampa Bay CDC has a financial affiliation with HUD, Neighborworks America, Florida Housing Finance corporation- FCP Program, Pinellas County, Pasco County, The City of Clearwater, The City of Largo, The City of St...Petersburg, and banks including but not limited to Bank of America, Wells Fargo, and JP Morgan Chase. I agree that Tampa Bay CDC may release information about my membership, to the proper officials, in compliance with these contracts. As a housing counseling program participant, you are not obligated to use the products and services of Tampa Bay CDC or our industry partners.

Alternative Services, Programs, and Products & Client Freedom of Choice: You are not obligated to participate or use any programs and/or services while you are receiving housing counseling from our agency. Your participation in a Tampa Bay CDC program does not obligate or require you to use any series or products that may be suggested, offered, or recommended by Tampa Bay CDC. 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 bank, and legal aid assistance. This list also identifies alternative agencies that provide services, programs, or products identical to those offered by Tampa Bay CDC and its exclusive partners and affiliates.

Privacy Policy: I/ We acknowledge that I/ We received a copy of Tampa Bay CDC’s Privacy Policy.

Errors, Omissions and Disclaimer of Liability: I/We agree Tampa Bay CDC, 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 Tampa Bay CDC counseling, and I hereby release and waive all claims of action against Tampa Bay CDC 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.

Quality Assurance: In order to assess client satisfaction and in compliance with grant funding requirements, Tampa Bay CDC, 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 Tampa Bay CDC’s grantors such as HUD or NeighborhoodWorks America.

Authorization to Release Information: I/we hereby authorize Tampa Bay CDC to obtain all information necessary, including a credit report, to assist me/us in an evaluation of our capacity to successfully accomplish, or maintain homeownership I authorize TAMPA BAY COMMUNITY DEVELOPMENT CORP. to submit client-level information to the Florida Housing Finance Corporation and my Lender for the Foreclosure Counseling Program (if applicable) I authorize Florida Housing Finance Corporation to open files to be reviewed for program monitoring and compliance purposes. I authorize Florida Housing Finance Corporation to conduct follow-up with me related to program evaluation. I understand that depending on the type of service received, the information may be shared with realtors and/or lenders in an effort to determine eligibility for mortgage financing, and develop a plan to correct qualification deficiencies in the pursuit of a mortgage approval. I/we further authorize our first mortgage lender Closing Title Company and/or realtor to provide Tampa Bay CDC with copies of any documents from my/our mortgage or real estate file that would assist Tampa Bay CDC in the completion of my file.

Home Inspection Materials: (Home Buyer Education and/or Pre-Purchase Counseling Only). By signing below I/ We certify that I/ We received the following materials: “For Your Protection Get a Home Inspection” and “Ten Important Questions to Ask a Home Inspector” Unless seeking services other than Home Buyer Education or Pre-Purchase counseling in which case these materials are not applicable.

By Signing below, I/ We acknowledge that I/We received, reviewed and agree to Tampa Bay CDC’s Program Disclosures as provided herein.

__________________________________________ _________________________________
Applicant’s Social Security # 
Co-Applicant Social Security #
Applicant: ________________________________ Date__________
Co-Applicant: ______________________________ Date__________
Counselor: ________________________________ Date__________

10/03/19
For Your Protection: Get a Home Inspection

Why a Buyer Need a home Inspection?
A home inspection gives the buyer more detailed information about the overall condition of the home prior to purchase. In a home inspection, a qualified inspector takes an in-depth, unbiased look at your potential new home to:

**Evaluate the physical condition:** Structure, construction, and mechanical systems: Identify items that need to be prepared or replaced; and estimate the remaining useful life of the major systems, equipment, structure, and finishes.

You Must Ask for a Home Inspection
A home inspection will only occur if you arrange for one. FHA does not perform a home inspection. Decide early. You may be able to make your contract contingent on the results of the inspection.

Appraisals are Different from Home Inspections
An appraisal is different from a home inspection and does not replace a home inspection. Appraisals estimate the value of the property for lenders. An appraisal is required to ensure the property is marketable. Home inspections evaluate the condition of the home for home buyers.

FHA Does Not Guarantee the Value or Condition of your Potential New Home
If you find problems with your new home after closing, FHA cannot give or lend you money for repairs, and FHA cannot buy the home back from you. Ask a qualified home inspector to inspect your potential new home and give you the information you need to make a wise decision.

Radon Gas Testing and other safety/health issues
The United States Environmental Protection Agency and the Surgeon General of the United States have recommended that all houses should be tested for radon. For more information on radon testing, call the toll free National Radon Information Line at 1-800-sos-Randon or 1-800-767-7236. Ask your home inspector about additional health and safety tests that may be relevant for your home.

Be an Informed Buyer
It is your responsibility to be an informed buyer. You have the right to carefully examine your potentially new home with a qualified home inspector. To find a qualified home inspector ask for references from friends, realtors, local licensing authorities and organizations and test home inspectors.

10/03/19
PRIVACY POLICY

Tampa Bay Community Development Corporation 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 Counseling Agreement. We may also use anonymous aggregated case file information for the purpose of evaluating our services, gathering valuable research information and designing future programs.

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; tax statements, bank statements;
- Information we receive from a credit reporting agency, such as your credit history

You may opt-out of certain disclosures
- You have the opportunity to “opt-out” of disclosures of your nonpublic personal information to third parties (such as your creditors), that is directed to us not to disclose.
- If you choose to “opt-out”, we will not be able to answer questions from your creditors. If at any time, you wish to change your decision with regard to your “opt-out” decisions, you may contact us in writing at Tampa Bay CDC, 2139 N.E. Coachman Road, Suite 1, Clearwater, FL 33765.

Release of your information to third parties
- So long as you have not opted-out, we may disclose some or all of the information that we collect, as described above, to your creditors or third parties where we have determined that it would be helpful to you, would aid us in counseling you, or is a requirement of grant awards which make our services, possible.
- We may also disclose any nonpublic personal information about you or former clients 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 to those employees who need to know that information to provide services to you. We maintain physical, electronic and procedural safeguards that comply with federal regulations to guard your nonpublic personal information.

SOCIAL SECURITY NUMBER COLLECTION POLICY DISCLOSURE
Effective October 1, 2007
Please be advised that Tampa Bay CDC and its government funding sources collect your Social Security number for the following purposes: Classification of accounts; identification and verification; credit worthiness; billing and payments; data collection, reconciliation, tracking, benefit processing, tax reporting and qualification for grant or loan processing under Section 119.071(5), Florida Statutes (2007). Social Security numbers serve as a unique numeric identifier and may be used for such purposes.

PLEASE RETAIN THESE DISCLOSURES FOR YOUR RECORDS  DO NOT RETURN THIS FORM WITH YOUR APPLICATION
10 Important Questions to ask Your Home Inspector

1. **What does your inspection cover?** The inspector should ensure that their inspection and inspection report will meet all applicable requirements in your state if applicable and will comply with a well-recognized standard of practice and code of ethics. You should be able to request and see a copy of these items ahead of time and ask any questions you may have. If there are any areas you want to make sure are inspected, be sure to identify them upfront.

2. **How long have you been practicing in the home inspection profession and how many inspections have you completed?** The inspector should be able to provide his or her history in the profession and perhaps even a few names as referrals. Newer inspectors can be very qualified, and many work with a partner or have access to more experienced inspectors to assist them in the inspection.

3. **Are you specifically experienced in residential inspection?** Related experience in construction or engineering is helpful, but is no substitute for training and experience in the unique discipline of home inspection. If the inspection is for a commercial property, then this should be asked about as well.

4. **Do you offer to do repairs or improvements based on the inspection?** Some inspector associations and state regulations allow the inspector to perform repair work on problems uncovered in the inspection. Other associations and regulations strictly forbid this as a conflict of interest.

5. **How long will the inspection take?** The average on-site inspection time for a single inspector is two to three hours for a typical single-family house; anything significantly less may not be enough time to perform a thorough inspection. Additional inspectors may be brought in for very large properties and buildings.

6. **How much will it cost?** Costs vary dramatically, depending on the region, size and age of the house, scope of services and other factors. A typical range might be $300-$500, but consider the value of the home inspection in terms of the investment being made. Cost does not necessarily reflect quality. HUD does not regulate home inspection fees.

7. **What type of inspection report do you provide and how long will it take to receive the report?** Ask to see samples and determine whether or not you can understand the inspector's reporting style and if the time parameters fulfill your needs. Most inspectors provide their full report within 24 hours of the inspection.

8. **Will I be able to attend the inspection?** This is a valuable educational opportunity, and an inspector's refusal to allow this should raise a red flag. Never pass up this opportunity to see your prospective home through the eyes of an expert.

9. **Do you maintain membership in a professional home inspector association?** There are many state and national associations for home inspectors. Request to see their membership ID, and perform whatever due diligence you deem appropriate.

10. **Do you participate in continuing education programs to keep your expertise up to date?** One can never know it all, and the inspector's commitment to continuing education is a good measure of his or her professionalism and service to the consumer. This is especially important in cases where the home is much older or includes unique elements requiring additional or updated training.

**Pasco Office**
(727) 847-3800

**Clearwater Office**
(727) 442-7075

Tampa Bay CDC is a HUD Approved Counseling Agency

10/03/19