

NEIGHBORHOOD STABILIZATION PROGRAM (NSP)



Intake Application

This form is needed to determine if your household is eligible to participate in the Neighborhood Stabilization Program (NSP-2) for "NSP-Home Purchase" or Rental Program leased at "High Home Rents".

ARE YOU INTERESTED IN: **BUYING A HOME** OR **RENTING**

APPLICANT INFORMATION

Primary Applicant's Name:		US Citizen <input type="checkbox"/> Perm. Resident <input type="checkbox"/> Other <input type="checkbox"/>		Cell Number:	
Spouse's Name:		US Citizen <input type="checkbox"/> Perm. Resident <input type="checkbox"/> Other <input type="checkbox"/>		Cell Number:	
Current Address:				Home Phone:	
City:		State:		Zip Code:	

List all persons who are living with you or will be living with you in your new home.

HOUSEHOLD COMPOSITION

1.	NAMES:	RELATIONSHIP	Date of Birth	GENDER	Student Status			SOCIAL SECURITY NUMBER	Receiving Income	
					F/T= Full Time	P/T= Part Time			Yes	No
				M / F	F/T	P/T	N/A		Yes	No
				M / F	F/T	P/T	N/A		Yes	No
				M / F	F/T	P/T	N/A		Yes	No
				M / F	F/T	P/T	N/A		Yes	No
				M / F	F/T	P/T	N/A		Yes	No
				M / F	F/T	P/T	N/A		Yes	No
				M / F	F/T	P/T	N/A		Yes	No

Are any of the household members listed above foster children?	No ___	Yes ___	Who?
Are any of the household members listed above a live-in attendant?	No ___	Yes ___	Who?
Are any household members temporarily absent from the home?	No ___	Yes ___	Who?
Do you anticipate any other members will join your household within the next 12 months?	No ___	Yes ___	If yes, explain:

INCOME INFORMATION
Includes: Wages, salaries and tips, alimony, child support, military income, part-time income, temporary income, Social Security, SSI, TANF, other benefits, other income.
FOOD STAMPS ARE NOT CONSIDERED INCOME – do not list food stamps.
List ALL household members and their incomes. Attach a separate sheet if you need more space.

Household Member Name	Source of Income	Payment Basis (weekly, bi-weekly, monthly)

Current Employment Contact Information			
Household Member's Name	Occupation	Work Phone	Work Fax
Name and Street Address of Employer	City	State	Zip Code
Date Hired	Salary \$ _____	<input type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-weekly <input type="checkbox"/> Twice a month <input type="checkbox"/> Monthly <input type="checkbox"/> Yearly <input type="checkbox"/> Other	# of hours per week

Current Employment Contact Information			
Household Member's Name	Occupation	Work Phone	Work Fax
Name and Street Address of Employer	City	State	Zip Code
Date Hired	Salary \$ _____	<input type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-weekly <input type="checkbox"/> Twice a month <input type="checkbox"/> Monthly <input type="checkbox"/> Yearly <input type="checkbox"/> Other	# of hours per week

Current Employment Contact Information			
Household Member's Name	Occupation	Work Phone	Work Fax
Name and Street Address of Employer	City	State	Zip Code
Date Hired	Salary \$ _____	<input type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-weekly <input type="checkbox"/> Twice a month <input type="checkbox"/> Monthly <input type="checkbox"/> Yearly <input type="checkbox"/> Other	# of hours per week

ASSET INFORMATION			
Do you own real estate property? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, what is its current market value? If you have a mortgage on the property, what is the current balance owed on the mortgage? List below the types and sources of any household assets. Provide both the current cash value and the estimated annual income from the asset.			
Household Member Name	Type and Source of Asset (Savings/checking accounts, investments, etc.)	Cash Value of Asset	Annual Income From Asset

LIABILITIES INFORMATION			

	Monthly Payment	Balance
Loan \$		
Loan \$		
Car Payment \$		
Car Payment \$		
Credit Card \$		
Credit Card \$		
Rent \$		

CONFLICT OF INTEREST INFORMATION:

1. Is anyone in the household currently serving (or served within the last 12 months) as an employee, agent, consultant, officer, or elected or appointed official of El Paso Collaborative for Community & Economic Development, or it's consortium members, Habitat for Humanity, Project Vida, AYUDA, Inc., Karma-JKS Properties, Inc. Dawco Home Builders, LLC? No Yes
 If YES, identify who, organization and role? _____ is this a current role? No Yes
 If NO, identify date role ceased? _____
2. Is anyone in the household related to anyone currently serving (or who has served within the last 12 months) as an employee, agent, consultant, officer, or elected official of El Paso Collaborative for Community & Economic Development, or it's consortium members, Habitat for Humanity, Project Vida, AYUDA, Inc., Karma-JKS Properties, Inc., Dawco Home Builders LLC. (Either through familial or business ties)? No Yes
 If YES, identify who, organization and role? _____
 If NO, identify date role ceased? _____

INFORMATION FOR GOVERNMENT MONITORING PURPOSES

The following information is requested by the Federal Government for certain types of Assistance related to a dwelling in order to monitor the compliance with equal credit opportunity, fair housing and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. The law prohibits discrimination on the basis of this information, or on whether you choose to furnish it. If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation. If you do not furnish ethnicity, race, or sex, under Federal regulations, your interviewer is required to note the information on the basis of visual observation and surname if you have made this application in person. If you do not wish to furnish the information, please check the box below. (Interviewer must review the above material to assure that the disclosures satisfy all requirements to which the organization is subject under applicable state law for the particular type of assistance applied for.)

BORROWER		CO-BORROWER	
I do not wish to furnish this information		I do not wish to furnish this information	
Ethnicity:	Hispanic or Latino Not Hispanic or Latino	Ethnicity:	Hispanic or Latino Not Hispanic or Latino
Race:	American Indian or Alaska Native Asian Black or African American Native Hawaiian or Other Pacific Islander White	Race:	American Indian or Alaska Native Asian Black or African American Native Hawaiian or Other Pacific Islander White
Sex:	Female Male	Sex:	Female Male



EL PASO COLLABORATIVE
for
Community and Economic Development

Participant's Certification and Authorization

CERTIFICATION

The Undersigned certify the following:

1. I/We have applied for NSP Program Assistance from El Paso Collaborative for Community and Economic Development. In applying for this, I/We completed an application containing various information for the purpose of obtaining Assistance including the amount and source of the down payment, employment and income information, and the assets and liabilities. I/We certify that all of the information is true, correct and complete. I/We made no misrepresentations in the application or other documents, nor did I/We omit any pertinent information.
2. I/We understand and agree that El Paso Collaborative for Community and Economic Development reserves the right to change the review processes and request additional supporting documentation. This will include verifying the information provided on the application with the employer and/or the financial institution.
3. I/We fully understand that it is a Federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements when applying for Assistance, as applicable under the provisions of Title 18, United States Code, and Section 1014.

AUTHORIZATION TO RELEASE INFORMATION

To Whom It May Concern:

1. I/We have applied for assistance from El Paso Collaborative for Community and Economic Development. As part of the application process, El Paso Collaborative for Community and Economic Development and federal agencies may verify information contained in my/our application and in other documents required in connection with the program, either before the assistance is provided or as part of its quality control program.
2. I/We authorize you to provide to the El Paso Collaborative for Community and Economic Development and to any other federal agencies the information requested. El Paso Collaborative for Community and Economic Development may be accountable to and all information and documentation that they request. **Such information includes, but is not limited to, employment history and income; bank, money market and similar account balances; credit history; and copies of income tax returns.**
3. A copy of this authorization may be accepted as an original

1. Head of household: _____

SSN: _____ Date: _____

3. Other adult member: _____

SSN: _____ Date: _____

5. Other adult member: _____

SSN: _____ Date: _____

2. Spouse Signature _____

SSN: _____ Date: _____

4. Other adult member: _____

SSN: _____ Date: _____

6. Other adult member: _____

SSN: _____ Date: _____





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PRIVACY NOTICE

This notice is given in accordance with the provisions of the Gramm-Leach Bliley Act, Title V, Subtitle A, (Public Law 106-102) and the Federal Trade Commission regulations set forth in 16CFR 313 pertaining to Privacy of the Consumer Financial Information.

El Paso Collaborative for Community and Economic Development is committed to keeping Nonpublic Personal Information that we collect confidential and secure. This notice is to inform you of our policies regarding Nonpublic Personal Information.

Federal Law and Regulations define Nonpublic Personal Information as:

Personally identifiable financial information; and

1. Any list, description or other grouping of consumers (and publicly available information pertaining to them) that is derived using any personally identifiable financial information that is not publicly available.

Under Federal Law and Regulations Nonpublic Personal Information does not include:

1. Publicly available information, [except any list, description, or other grouping of consumers (and publicly available information pertaining to them) that is derived using any personally identifiable financial information that is not publicly available] or
2. Any list, description, or other grouping of consumers (and publicly available information pertaining to them) that is derived without using any personally identifiable financial information that is not publicly available.

We collect Nonpublic Personal Information about you from the following sources:

- Information we receive from your applications or other forms;
- Information about your transaction with us our affiliates, or others; and
- Information we receive from a consumer-reporting agency.

We do not disclose any Nonpublic Personal Information about our customers or former customers to anyone, except, as permitted by law.

We restrict access to Nonpublic Personal Information about you to our vendors and employees who need to know that information to provide products or services to you. We maintain physical, electronic, and procedural safeguards that comply with Federal Regulations to guard your Nonpublic Personal Information.

The foregoing EL PASO COLLABORATIVE FOR COMMUNITY AND ECONOMIC DEVELOPMENT PRIVACY NOTICE was received by the undersigned on

Date

(Head of Household)

(Spouse)



EL PASO COLLABORATIVE FOR COMMUNITY & ECONOMIC DEVELOPMENT
NEIGHBORHOOD STABILIZATION PROGRAM (NSP)

CONFLICT OF INTEREST CERTIFICATION

The Neighborhood Stabilization Program (NSP) is funded through a federal grant from the U.S. Department of Housing and Urban Development (HUD) and is governed by the Code of Federal Regulations, 24 CFR 92.356 and 24 CDF 570.611. These regulations prohibit participation in some programs by any person who exercises, or who has exercised, any functions or responsibilities with respect to these federal grant funds. The persons affected include employees, board members or consultants of the El Paso Collaborative for Community and Economic Development, Habitat for Humanity El Paso, AYUDA, Inc., Project Vida, Karma-JKS Properties, Inc., Dawco Home Builders, LLC. This limitation also applies to immediate family members of any such persons who exercise or have exercised function or responsibilities with respect to these grant funds, including immediate family members of employees, board members or consultants of these organizations either during their tenure or for one year thereafter. "Immediate family" includes (whether by blood or adoption): the spouse, parent (including a stepparent), child (including a stepchild), brother, sister (including a stepbrother or stepsister), grandparent, grandchild, and in-laws.

- 1) Are you employed by the El Paso Collaborative for Community and Economic Development, Habitat for Humanity El Paso, AYUDA, Inc. or Project Vida? Yes No If yes, which organization? _____
- 2) Are any immediate family members (as described above) currently employed by any of these four organizations? Yes No
If yes, please provide relatives' name(s) and name of the organization where employed. _____
If no, were any members of your immediate family employed by any of these four organizations within the most recent 12-month period? Yes No. If yes, which organization? _____
- 3) Are you an agent or consultant of the any of these four organizations? Yes No. Are you the immediate family member of any agent or consultant of any of these four organizations? Yes No. If yes, please provide name and contact information for the agent or consultant. _____

Certification: I certify that I am not an employee, board member or consultant of any of these organizations nor do I have immediate family ties or business relationships with any of these individuals. I also certify that the information I am providing is true and could be subject to verification at any time by a third party. I acknowledge that the provision of false information could leave me subject to the penalties of Federal, State and local law.

Applicant

Signature /Date

Applicant

Signature /Date

WARNING: Title 18, Section 1001 of the U.S. Code states a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. If you have any questions, please contact Delia Chavez, Executive Director, El Paso Collaborative for Community and Economic Development at (915) 590-1210 Ext. 112 or delia@ep-collab.org.



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NSP PROPERTY DESCRIPTION DISCLOSURE

I/We understand that the NSP homes have the following common characteristics:

_____ Homes will be built in 1978 or thereafter.

_____ Homes will **NOT** have swimming pools.

_____ Homes will be single-family permanently built homes (no condominiums or mobile homes).

_____ Homes will **NOT** be located within flood prone areas.

_____ Homes will be located within NSP target census tracts.

Signature Date

Signature Date

Signature Date

Signature Date

