

Homeowner Connection 2022

Home maintenance can be a formidable responsibility of homeownership. Many obstacles can get in the way of our intentions of making improvements to our homes – lack of know-how, lack of time, lack of savings, and all too frequently, not having a qualified contractor that you can trust. Neighborhood Housing Partnership (NHP), as a NeighborWorks® HomeOwnership Center, understands that homeowners may need help with urgent repairs. NHP also understands that well-maintained homes are vital for healthy neighborhoods.



Home Repair Assistance – Single Family Owner-Occupied Properties, available City and County-wide

- **Emergency Repair** - Program to address serious housing problems like a leaking roof, inoperable furnace, electrical or plumbing repair.
- **Aging in Place** - Program to assist senior homeowners to make critical and immediate repairs to allow them to remain in their homes. (e.g., accessibility needs such as grab bars, ramps, or bathroom renovation).

***2 repayment options based on income-eligibility – grant and repayable low-interest loan.
All programs subject to funding availability!***

What to Expect:

- Staff will take preliminary information. You will be sent an application package and asked to collect necessary income and credit information. Upon receipt of the completed file, NHP staff will review your information to determine if a loan or grant is right for you. *
- If your request is determined eligible, our Project Manager will schedule time to inspect your property.
- Staff will request bids from qualified contractors and assist you with choosing the lowest and best option.
- Once your loan or grant is approved, you will have a signing of documents at NHP's office.
- Project Manager will oversee the construction; if loan, project management fee is \$150; may be financed.
- Contractor is paid upon your and NHP's approval; you receive a 5-year labor warranty.

*Return applications to 527 E. Home Rd., Springfield, OH 45503, or email to amiller@springfieldnhp.org.

Early Delinquency Intervention / Foreclosure Counseling:



As a HUD-certified counseling agency, NHP provides resources to assist homeowners in understanding the foreclosure process in the State of Ohio; budgeting; working with your lender; and applying for funds to bring your mortgage current, if eligible. Visit Savethedream.ohiohome.org to learn more.

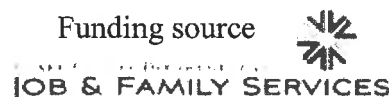
Beware of “RESCUE SCAMS” offering assistance for a FEE!

Listen to What Your Neighbors Say about NHP:

- “Not only are the employees helpful and friendly, but they also keep you informed every step of the way.”
- “NHP helped us get a job done that we had been putting off for years!”
- “NHP can be trusted to look out for your best interests; the contractors used are carefully screened and the work is closely monitored.”

How Do You Participate?

Call NHP at (937) 322-4623, stop by our office at 527 E. Home Rd., Springfield, OH 45503, or visit us online at www.springfieldnhp.org. MB #803422 (TTY/TDD & Voice: 711)





Neighborhood Housing Partnership
OF GREATER SPRINGFIELD

ITEMS NEEDED AT TIME OF EMERGENCY REPAIR APPLICATION

- NHP intake form, Credit Authorization, Housing Counseling Disclosure, and Budget (completed and signed)
- Copy of driver's license or picture identification
- Last 2 years' W-2 forms (2021 / 2020) with Federal tax returns
- Copy of most recent month's paystubs
- Documentation of all other income; examples include:
 - Awards letter for Social Security benefits
 - 12 months' recent history for Child Support benefits
 - Verification of Retirement/Pension benefits
- One recent utility bill (either gas or electric bill)
- Copy of (2) most recent bank statements, all pages (*not transaction histories*)
- Copy of most recent statement from 1st mortgage lender
- Current Declarations Page for hazard insurance policy (If not available, agent's name and phone #)
- Credit Report fee - \$37.55/individual; \$58.20/joint (amortizing loan programs only)
**Fee may be paid at closing, exception based on borrower hardship*

Additional information may be requested at time of application~

- Divorce Decree
- Bankruptcy Papers (Discharge letter and List of creditors)
- If self-employed, 2 years' Tax Returns and Current Profit and Loss Statement

Neighborhood Housing Partnership of Greater Springfield, Inc.

MB #803422

527 E. Home Rd., Springfield, Ohio 45503 (937) 322-4623

www.springfieldnhp.org

Helping you find the way **home**



**Neighborhood Housing Partnership of Greater Springfield
EMERGENCY REPAIR APPLICATION**

Date: _____

Please provide information about yourself. Thank you!

APPLICANT INFORMATION			CO-APPLICANT INFORMATION		
First Name:	MI:		First Name:	MI:	
Last Name:			Last Name:		
Address:			Address:		
City	State:	Zip	City:	State:	Zip
Home Phone:	Work:	Cell Phone:	Home Phone:	Work:	Cell Phone:
E-mail address:			E-mail address:		
SS#	Birthdate:		SS#	Birthdate:	
Education Level:			Education Level:		
Gender:	M	F	Gender:	M	F
Ethnicity: Hispanic or Non-Hispanic Race:			Ethnicity: Hispanic or Non-Hispanic Race:		

Please check all that apply:

6. Marital Status Single Married Divorced Separated Widowed
7. Female Head of Household? Yes No 8. Foreign Born? Yes No
9. Are you a First-time Homebuyer (not owned in 3 years)? Yes No
10. Disabled? Yes No 11. Veteran? Yes No
12. Family Size _____ (Yourself plus dependents)
13. Gross Annual Household Income \$ _____
(before taxes – include child support, pension, disability, etc)
14. Do you currently? Rent, if so; Section 8? Own Other _____
15. How Did You Hear About Our Organization?
 Newspaper Bank Walk-In Staff Member Previous Customer Realtor
 Friend/Relative Flyer Homebuyer Fair Yard Sign Other: _____
16. Services I am interested in: Homebuyer Education Credit Counseling/Money Management
 Home Repair Repair needed: _____
 Down Payment Assistance Mortgage Delinquency Counseling

I certify that all of the above information is correct and true to the best of my knowledge. I understand that false or misleading information may be grounds for rejection of services. Furthermore, I understand that the completion of the application in no way guarantees me that I will receive housing assistance.

Applicant Signature _____

Date _____

Co-Applicant Signature _____

Date _____

MY MONTHLY BUDGET

MONTHLY EXPENSE

AMOUNT

HOME	
Mortgage/Rent	
Repairs	
UTILITIES	
Electric	
Gas	
Water, Sewer & Garbage	
Phone (Cell)	
Phone/Cable/Satellite	
Internet	
Other	
TRANSPORTATION	
Car Payment	
Gas	
Repairs/Maintenance	
INSURANCE	
Car Insurance	
Health Insurance	
Other	
DEBT PAYMENTS	
Credit Card	
Other	
MISC.	
Groceries	
Personal Care (clothing, shampoo, etc.)	
Household Items (cleaning supplies, toilet paper)	
	TOTAL DUE
	TOTAL WAGES
	TOTAL LEFTOVER

Neighborhood Housing Partnership of Greater Springfield, Inc. (NHP)
527 E. Home Rd., Springfield, OH 45503
Phone: (937)322-4623
Fax: (937)322-4619

Waiver and Authorization to Release Information

The client recognizes that in order for Neighborhood Housing Partnership of Greater Springfield to provide its services, the referral source for the client, as well as other persons, firms or organizations will request NHP to furnish certain information concerning the clients' financial condition.

The client expressly authorizes NHP to: 1) disclose any information concerning the financial status of the client to the referral source and project partners; 2) obtain and review financial information concerning the client from the referral source and project partners as NHP deems necessary, 3) obtain and review the clients' credit report (s) from the credit reporting agencies, 4) request verification of income and residence, and 5) collect copies of my loan application, supporting documentation and closing statement from my lender and/or closing company handling my loan.

NHP agrees that all information in the clients file will be otherwise kept confidential.

The client agrees to hold NHP, their employees, officers and agents harmless from any claim, suit, action or demand in connection with any services rendered by NHP to the client. The client recognizes that NHP has no responsibility or obligation for any part of the loan approval/denial process.

NHP has a commitment to provide quality services. If you have any concerns or complaints regarding the services provided by NHP, you may contact Greg Womacks, Executive Director, at (937) 322-4623.

The client also authorizes NHP to disclose the client's identity and his/her personal and financial information to a party collecting such information for research, the results of which are to be used by NHP and comparable organizations, and to the following parties or for the following purposes:

Client Signature _____	Date _____	Client Signature _____	Date _____
SS# _____		SS# _____	
Amy J. Miller Sr. Housing Counselor	Date _____	Property Address: _____	
MB #803422	February 2021	City, State: _____	





Housing Counseling - Conflict of Interest Disclosure

Neighborhood Housing Partnership of Greater Springfield, Inc. (NHP) creates and preserves affordable, quality housing and strong neighborhoods through partnerships of residents, government and business. NHP is a non-profit 501©3 organization dedicated to increasing and preserving homeownership, promoting the development and rehabilitation of housing, and supporting vibrant, healthy neighborhoods.

1. I understand that NHP offers the following housing counseling services in-house:
 - Pre-purchase individual counseling; Pre-purchase group education; Post-purchase individual counseling
2. I understand that NHP offers the following loan products for home repairs in-house:
 - Emergency Repair Loans (Amortizing and Deferred); Emergency Repair Grants
3. NHP provides housing counseling after which I will receive an action plan consisting of recommendations, possibly including referrals to other community agencies as appropriate.
4. I understand that NHP is a licensed mortgage broker and may originate first and second mortgage products.
5. I understand that NHP may receive compensation from USDA and other lenders for packaging and/or loan originations.
6. I may be referred to other services of the organization or other 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 that NHP provides information and education on numerous loan products and housing programs and I further understand that the housing counseling I receive from NHP in no way obligates me to choose any of these particular loan products or housing programs.
8. 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, but I am not obligated to use any of the services offered to me.
9. I acknowledge that I have received a copy of NHP’s Privacy Policy and Client Termination/Close-out Policy.
10. I acknowledge that I have received the following home inspection materials: HUD/EPA Forms "For Your Protection: Get a Home Inspection", "Ten Important Questions to Ask Your Home Inspector", and "Disclosure of Lead-Based Paint Hazards in Housing".
11. I understand that the following NHP services have an associated fee that I am responsible to pay:
 - Homebuyer Education Course: \$50.00
 *Scholarships available to Clark County residents with household income under 200% Federal Poverty guidelines with at least 1 dependent child
 - eHome America online HBE Course: \$99.00
 - Tri-Merge Credit Reports with Scores – Individual / Joint: \$37.55 / \$58.20
 - HOEPA individual counseling session: \$100.00

Client’s Signature(s): _____

Date: _____

updated 04/2022



Privacy Policy

Neighborhood Housing Partnership of Greater Springfield (NHP) 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 Foreclosure Mitigation 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; and
- Information we receive from a credit reporting agency, such as your credit history.

You may opt-out of certain disclosures

1. You have the opportunity to "opt-out" of disclosures of your nonpublic personal information to third parties (such as your creditors), that is, direct us not to make those disclosures.
2. 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", you may call us at (937) 322-4623 and do so.

Release of your information to third parties

1. 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.
2. 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).
3. 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.

Client Termination/ Close-out Policy

NHP seeks to be an ongoing resource for clients of housing counseling services. Housing counseling includes Pre-purchase, Post-purchase/non-default, and Mortgage Delinquency. In some circumstances, a client may be terminated under the following conditions:

- (1) The client meets his or her housing need or resolves the housing problem; e.g.
 - a) Pre-Purchase: purchases a home
 - b) Mortgage Delinquency: reaches an outcome with the lender
- (2) The agency determines that further housing counseling will not meet the client's housing need or resolve the client's housing problem;
- (3) The agency attempts to, but is unable to, locate the client;
- (4) The client does not follow the agreed-upon action plan;
- (5) The client otherwise terminates housing counseling;
- (6) The client fails to appear for 2 or more housing counseling appointments.
- (7) The client threatens or exhibits abusive conduct toward counselor(s) and/or NHP staff.

General guideline: Client files seasoned 6 months (based on intake date) will be reviewed monthly to determine if close out/termination is warranted for any of the above conditions. A letter will be mailed to client asking for a response within ten (10) days to keep their file active. Client file will be documented and database status changed to "inactive", if no response is received. A file status will be changed to "completed" if client has meet goal (such as home purchase or loan modification). Clients will be welcome to re-activate file at any time for additional counseling.