



---

120 E. Main Street, Ravenna, Ohio 44266  
330-297-6400 \* www.ndsohio.org \* 330-297-5303 Fax  
166 2<sup>ND</sup> St NW, Barberton Ohio 44203 234 678-5444

Please complete the attached application in full, and return along with the following documentation:

- Proof of Homeowners Insurance. (The current declarations page. Not the entire policy.)
- Current pay stubs for all those working in the family over 18 years of age. (2 months worth)
- SSI, Disability, or Pension, most current statement or letter providing monthly or yearly amount received.
- Checking, Savings, Certificate of Deposit, Assets, and Investments etc. statements. (3 months worth)
- Self Employed – provide the most recent income tax returns (3 years)

If you have any questions or concerns you may contact Stacy at (330) 297-6400 Ext. 202

**“In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability (not all prohibited bases apply to all programs). To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410, or call (800) 795-3272 (voice) or (202) 720-6382 (TDD).”**







**CO-APPLICANT EMPLOYMENT — Last 2 Years**

**Primary Employer:** \_\_\_\_\_

\_\_\_\_\_

Title \_\_\_\_\_ Hire Date \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Part-Time or Full-Time (Please Circle)

**Gross Income** (before taxes): \$ \_\_\_\_\_

Is this amount paid \_\_\_\_\_ hourly \_\_\_\_\_ weekly \_\_\_\_\_ every two weeks \_\_\_\_\_ twice a month \_\_\_\_\_ monthly?

**Secondary Employer (if applicable):** \_\_\_\_\_

\_\_\_\_\_

Title \_\_\_\_\_ Hire Date \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Part-Time or Full-Time (Please Circle)

**Gross Income** (before taxes): \$ \_\_\_\_\_

Is this amount paid \_\_\_\_\_ hourly \_\_\_\_\_ weekly \_\_\_\_\_ every two weeks \_\_\_\_\_ twice a month \_\_\_\_\_ monthly?

**INCOME**

*Please Print Clearly*

Type of Income	<b>CUSTOMER</b> Monthly Amount	<b>CO-APPLICANT</b> Monthly Amount
Salary		
Alimony/Child Support		
Rental Income		
Social Security		
Pension Income		
Public Assistance		
Self-employment Income		
Dependent SSI Income		
Disability Income		
Other Employment		

	<b>CUSTOMER</b>		<b>CO-APPLICANT</b>	
	Yes	No	Yes	No
Can you document your child support/alimony income?				
If yes, how long will it continue?				
If your child or a family member receives SSI, how many more years will the payments continue?				
If you receive disability income, is it for a permanent disability?				

**LIQUID FUNDS/SAVINGS/INVESTMENTS***Please Print Clearly**Please list the approximate value of the following:*

	<i>CUSTOMER</i>	<i>CO-APPLICANT</i>
Checking account		
Savings account		
Cash		
CDs		
Securities (stocks, bonds, etc.)		
Retirement account		
Other Liquid Funds		

**LIVING EXPENSES**

	<i>CUSTOMER</i>	<i>CO-APPLICANT</i>
Current monthly mortgage		
Homeowners Insurance		
Property Taxes		

**ADDITIONAL INFORMATION**

Most convenient time for an individual appointment?      \_\_\_ AM      \_\_\_ PM

Home repair concerns \_\_\_\_\_

**AUTHORIZATION**

I authorize NDS, Inc. to:

- (a) pull my/our credit report to review my/our credit file for housing counseling in connection with my pursuit on a loan to purchase real property;
- (b) pull my/our credit report and review my/our credit file for informational inquiry purposes; and

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.

\_\_\_\_\_  
Customer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Applicant

\_\_\_\_\_  
Date





## **PRIVACY POLICY AND PRACTICES OF NEIGHBORHOOD DEVELOPMENT SERVICES, INC.**

We at Neighborhood Development Services, Inc. value your trust and are committed to the responsible management, use and protection of personal information. This notice describes our policy regarding the collection and disclosure of personal information.

Personal information, as used in the notice, means information that identifies an individual personally and is not otherwise publicly available information. It includes personal financial information such as credit history, income, employment history, financial assets, bank account information and financial debts. It also includes your social security number and other information that you have provided us on any applications or forms that you have completed.

### **Information We Collect**

**We collect personal information to support our lending operations, financial fitness counseling and to aid you in shopping for and obtaining a home mortgage from a conventional lender. We collect personal information about you from the following sources:**

- Information that we receive from you on applications or other forms,
- Information about your transactions with us, our affiliates or others,
- Information we receive from a consumer reporting agency, and
- Information that we receive from personal and employment references

### **We may disclose the following information about you:**

- Information we receive from you on applications or other forms, such as your name, address, social security number, employer, occupation, assets, debts and income;
- Information about your transactions with us, our affiliates or others, such as your account balance, payment history and parties to your transactions; and
- Information we receive from a consumer-reporting agency, such as your credit bureau reports, your credit history and your creditworthiness.

### **We may disclose your personal information to the following types of unaffiliated third parties:**

- Financial service providers, such as companies engaged in providing home mortgage or home equity loans,
- Others such as nonprofit organizations involved in community development, but only for program review, auditing, research, and oversight purposes.

**We may also disclose personal information about you to third parties as permitted by law. Prior to sharing personal information to unaffiliated third parties, except as described in this policy, we will give you an opportunity to direct that such information not be disclosed.**

## **Confidentiality and Security**

We restrict access to personal information about you to those of our employees who need to know that information to provide products and services to you and to help them do their jobs, including underwriting and servicing of loans, making loan decisions, aiding you in obtaining loans from others, and financial counseling. We maintain physical and electronic security procedures to safeguard the confidentiality and integrity of personal information in our possession and to guard against unauthorized access. We use locked files, users authentication and detection software to protect your information. Our safeguards comply with federal regulations to guard your personal information.

## **Directing Us Not to Make Disclosures to Unaffiliated Third Parties**

If you prefer that we not disclose personal information about you to unaffiliated third parties, you may opt out of those disclosures, that is, you may direct us not to make those disclosures (other than disclosures permitted by law).

- If you wish to opt out of disclosures to unaffiliated third parties other than nonprofit organizations involved in community development, you may check Box 1 on the attached Privacy Choices Form.
- If you wish to opt out of disclosures to nonprofit organizations involved in community development that are used only for program review, auditing, research and oversight purposes, you may check Box 2 on the attached Privacy Choices Form.

Please allow approximately 30 days from our receipt of your Privacy Choices Form for it to become effective. Your privacy instructions and any previous privacy instructions will remain in effect until you request a change.

**PRIVACY CHOICES FORM**

If you want to opt out, that is direct us not to make disclosures about your personal information (other than disclosures permitted by law) as described in this notice, check the box or boxes below to indicate your privacy choices. Then send this form to the address listed below.

**Box 1** – Limit disclosure of personal information about me to unaffiliated third parties other than nonprofit organizations involved in community development.

**Box 2** – Limit disclosure of personal information about me to nonprofit organizations involved in community development that are used only for program review, auditing, research and oversight purposes.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

If you have checked any of the boxes above, please mail this form in a stamped envelope to:

**Neighborhood Development Services, Inc.  
120 E. Main Street  
Ravenna, Ohio 44266**

Please allow approximately 30 days from our receipt of your Privacy Choices Form for it to become effective. Your privacy instructions and any previous privacy instructions will remain in effect until you request a change.

If you do not wish to sign either box listed above please sign below.

Signature: \_\_\_\_\_