

DATE:



PREQUALIFICATION INFORMATION WORKSHEET

PROGRAM INFORMATION REQUESTING

Program Applying For: Home Repairs Home Purchase

County in which you live or wish to live: Mitchell Yancey Madison Buncombe
 Henderson Transylvania Other:

HOUSEHOLD INFORMATION

Applicant's Name: _____ Social Security: _____ - _____ - _____ Date of Birth: _____

Status (check one): Married Separated Unmarried Widow/Other

Co-Applicant's Name: _____ Social Security: _____ - _____ - _____ Date of Birth: _____

Status (check one): Married Separated Unmarried Widow/Other

Mailing Address: _____
(please complete full mailing address with city and zip code)

Home Phone: _____ Work/Cell Phone: _____

Dependants in Household

NAME	SOCIAL SECURITY NUMBER	DATE OF BIRTH

OTHER ADULTS THAT WILL BE LIVING IN THE HOME- AGE 18 AND OVER

Name: _____ Social Security Number: _____ - _____ - _____ Date of Birth: _____

Income: \$ _____ Hourly Weekly Bi-weekly Monthly Hours per week: _____

Name: _____ Social Security Number: _____ - _____ - _____ Date of Birth: _____

Income: \$ _____ Hourly Weekly Bi-weekly Monthly Hours per week: _____

INCOME, WAGE, AND NON-WAGE INFORMATION

Applicant's Income: \$ _____ Hourly Weekly Bi-weekly Monthly Hours per week: _____

If Self-Employed: Net profit plus depletion and depreciation from Schedule C, last two year average: _____

Co-Applicant's Income: \$ _____ Hourly Weekly Bi-weekly Monthly Hours per week: _____

If Self-Employed: Net profit plus depletion and depreciation from Schedule C, last two year average: _____

IF YOU RECEIVE ANY OF THE FOLLOWING PLEASE COMPLETE:

INCOME SOURCE	AMOUNT RECEIVED	SPECIFY: WEEKLY/MONTHLY
CHILD SUPPORT		
STATE PUBLIC ASSISTANCE (AFDC)		
SOCIAL SECURITY BENEFITS		
FOOD STAMPS		
OTHER: PLEASE SPECIFY		

DEBTS AND EXPENSES

Rent: \$ _____ Monthly How long have you lived at the residence? _____

If less than two years please complete:

Prior Address: _____

How long? _____ Rent: \$ _____ Monthly

Child Care Expense: \$ _____ Weekly Bi-weekly Monthly

Other(alimony)please specify: _____ \$ _____ Weekly Bi-weekly Monthly

CREDITORS: PERSONAL LOANS, AUTO LOANS, CREDIT CARDS, AND OTHER

NAME OF CREDITOR	MINIMUM MONTHLY PAYMENT	OUTSTANDING BALANCE

Have you ever been obligated to a loan that resulted in foreclosure or repossession? Yes No

Have you been declared bankrupt within the past 7 years? Yes No

If you are requesting home repairs please list repairs you are requesting and how much you think you will need:

Note: This information submitted is used to make a preliminary decision of eligibility for RHS assistance. The information submitted should be accurate as possible. Final eligibility will be determined after a complete application is submitted to Rural Development. Please return this form to Rural Development NC or call our Office: (828) 765-0889 Ext. 4 or Fax: (828) 765-8455.

EMPLOYMENT HISTORY

(Applicant) Name and Address of Employer <input type="checkbox"/> Self Employed		Yrs. on this job	(Co-Applicant) Name and Address of Employer <input type="checkbox"/> Self Employed		Yrs. on this job
		Yrs. employed in this line of work/profession			Yrs. employed in this line of work/profession
Position/Title/Type of Business		Business Phone (incl. area code)	Position/Title/Type of Business		Business Phone (incl. area code)

If employed in current position for less than two years or if currently employed in more than one position, please complete the following:

Name and Address of Employer <input type="checkbox"/> Self Employed		Dates (from-to)	Name and Address of Employer <input type="checkbox"/> Self Employed		Dates (from – to)
		Monthly Income \$			Monthly Income \$
Position/Title/Type of Business		Business Phone (incl. area code)	Position/Title/Type of Business		Business Phone (incl. area code)
Name and Address of Employer <input type="checkbox"/> Self Employed		Dates (from – to)	Name and Address of Employer <input type="checkbox"/> Self Employed		Dates (from – to)
		Monthly Income \$			Monthly Income \$
Position/Title/Type of Business		Business Phone (incl. area code)	Position/Title/Type of Business		Business Phone (incl. area code)

Asset Information

Applicant: Checking account balance: _\$ _____ Savings account balance: _\$ _____

Co-Applicant: Checking account balance: _\$ _____ Savings account balance: _\$ _____

For other assets (stocks, bonds, certificates of deposit, real estate), please attach a separate sheet listing types and amounts.

Statement of Commitment

The self-help housing program requires that each household work approximately 20 hours per week on home construction. Can you realistically work approximately 20 hours per week? **Yes** _____ **No** _____

In the self help program, you not only work on your own home, but on homes belonging to others in the group, and they work on yours. Groups usually consist of four to eight participants. No member of the group moves in until all the homes are complete. Are you willing to complete all the homes in your group? **Yes** _____ **No** _____

Are you physically able to do light construction? **Yes** _____ **No** _____

Do you have transportation to get to and from the construction site? **Yes** _____ **No** _____

Applicant Rights and Responsibilities

I understand that I have the right to a fair hearing of any action directly concerning this application. I certify that I have read **completely** this application, or that it has been read to me. **I further certify that all information contained herein is true.** I also certify that a false statement or false representation made by me for the purpose of obtaining services makes me subject to prosecution under penalty of law. I also authorize Mountain Housing Opportunities, Inc. to make any and all inquiries to verify the answers I have given, such as release of information listed above to other agencies on my behalf for the purpose of verification in connection with any assistance that may be provided to me.

Applicant's Signature: _____ **Date:** _____

Co-Applicant's Signature: _____ **Date:** _____

Please return pre-application to:

Mountain Housing Opportunities, Inc.
64 Clingman Avenue, Suite 101
Asheville, NC 28801
ATTN: Megan Kirby
Phone: 828-254-4030 x 122
Fax: 828-254-0120



**United States Department of Agriculture
Rural Development
Rural Housing Service**

AUTHORIZATION TO RELEASE INFORMATION

TO: _____

RE: _____
Account or Other Identifying Number

Name of Customer

I, and/or adults in my household, have applied for or obtained a loan or grant from the Rural Housing Service (RHS), part of the Rural Development mission area of the United States Department of Agriculture. As part of this process or in considering my household for interest credit, payment assistance, or other servicing assistance on such loan, RHS may verify information contained in my request for assistance and in other documents required in connection with the request.

I, or another adult in my household, authorize you to provide to RHS for verification purposes the following applicable information:

- Past and present employment or income records.
- Bank account, stock holdings, and any other asset balances.
- Past and present landlord references
- Other consumer credit references.

If the request is for a new loan or grant, I further authorize RHS to order a consumer credit report and verify other credit information.

I understand that under the Right to Financial Privacy Act of 1978, 12 U.S.C. 3401, *et seq.*, RHS is authorized to access my financial records held by financial institutions in connection with the consideration or administration of assistance to me. I also understand that financial records involving my loan and loan application will be available to RHS without further notice or authorization, but will not be disclosed or released by RHS to another Government agency or department or used for another purpose without my consent except as required or permitted by law.

This authorization is valid for the life of the loan.

The recipient of this form may rely on the Government's representation that the loan is still in existence.

The information RHS obtains is only to be used to process my request for a loan or grant, interest credit, payment assistance, or other servicing assistance. I acknowledge that I have received a copy of the Notice to Applicant Regarding Privacy Act Information. I understand that if I have requested interest credit or payment assistance, this authorization to release information will cover any future requests for such assistance and that I will not be renofified of the Privacy Act information unless the Privacy Act information has changed concerning use of such information.

A copy of this authorization may be accepted as an original.

Your prompt reply is appreciated.

Signature (*Applicant or Adult Household Member*)

Date

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless as displays a valid OMB control number. The valid OMB control number for this information collection is 0575-0172. The time required to complete this information collection is estimated to average 5 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

NOTICE TO APPLICANT REGARDING PRIVACY ACT INFORMATION

The information requested on this form is authorized to be collected by the Rural Housing Service (RHS), Rural Business-Cooperative Services (RBS), Rural Utilities Service (RUS) or the Farm Service Agency (FSA) ("the agency") by title V of the Housing Act of 1949, as amended (42 U.S.C. 1471 et seq.) or by the Consolidated Farm and Rural Development Act (7 U.S.C. 1921 et seq.), or by other laws administered by RHS, RBS, RUS or FSA.

Disclosure of information requested is voluntary. However, failure to disclose certain items of information requested, including your Social Security Number or Federal Identification Number, may result in a delay in the processing of an application or its rejection. Information provided may be used outside of the agency for the following purposes:

1. When a record on its face, or in conjunction with other records, indicates a violation or potential violation of law, whether civil, criminal or regulatory in nature, and whether arising by general statute or particular program statute, or by regulation, rule, or order issued pursuant thereto, disclosure may be made to the appropriate agency, whether Federal, foreign, State, local, or tribal, or other public authority responsible for enforcing, investigating or prosecuting such violation or charged with enforcing or implementing the statute, or rule, regulation, or order issued pursuant thereto, if the information disclosed is relevant to any enforcement, regulatory, investigative, or prosecutive responsibility of the receiving entity.
2. A record from this system of records may be disclosed to a Member of Congress or to a Congressional staff member in response to an inquiry of the Congressional office made at the written request of the constituent about whom the record is maintained.
3. Rural Development will provide information from this system to the U.S. Department of the Treasury and to other Federal agencies maintaining debt servicing centers, in connection with overdue debts, in order to participate in the Treasury Offset Program as required by the Debt Collection Improvement Act, Pub. L. 104-134, Section 31001.
4. Disclosure of the name, home address, and information concerning default on loan repayment when the default involves a security interest in tribal allotted or trust land. Pursuant to the Cranston-Gonzales National Affordable Housing Act of 1990 (42 U.S.C. 12701 et seq.), liquidation may be pursued only after offering to transfer the account to an eligible tribal member, the tribe, or the Indian Housing Authority serving the tribe(s).
5. Referral of names, home addresses, social security numbers, and financial information to a collection or servicing contractor, financial institution, or a local, State, or Federal agency, when Rural Development determines such referral is appropriate for servicing or collecting the borrower's account or as provided for in contracts with servicing or collection agencies.
6. It shall be a routine use of the records in this system of records to disclose them in a proceeding before a court or adjudicative body, when: (a) the agency or any component thereof; or (b) any employee of the agency in his or her official capacity; or (c) any employee of the agency in his or her individual capacity where the agency has agreed to represent the employee, or (d) the United States is a party to litigation or has an interest in such litigation, and by careful review, the agency determines that the records are both relevant and necessary to the litigation, provided; however, that in each case, the agency determines that disclosure of the records is a use of the information contained in the records that is compatible with the purpose for which the agency collected the records.
7. Referral of names, home addresses, and financial information for selected borrowers to financial consultants, advisors, lending institutions, packagers, agents and private or commercial credit sources, when Rural Development determines such referral is appropriate to encourage the borrower to refinance the Rural Development indebtedness as required by title V of the Housing Act of 1949, as amended (42 U.S.C. 1471), or to assist the borrower in the sale of the property .
8. Referral of legally enforceable debts to the Department of the Treasury, Internal Revenue Service (IRS), to be offset against any tax refund that may become due the debtor for the tax year in which the referral is made, in accordance with the IRS regulations at 26 C.F.R. 301.6402-6T, Offset of Past Due Legally Enforceable Debt Against Overpayment, and under the authority contained in 31 U.S.C. 3720A.
9. Referral of information regarding indebtedness to the Defense Manpower Data Center, Department of Defense, and the United States Postal Service for the purpose of conducting computer matching programs to identify and locate individuals receiving Federal salary or benefit payments and who are delinquent in their repayment of debts owed to the U.S. Government under certain programs administered by Rural Development in order to collect debts under the provisions of the Debt Collection Act of 1982 (5 U.S.C. 5514) by voluntary repayment, administrative or salary offset procedures, or by collection agencies.
10. Referral of names, home addresses, and financial information to lending institutions when Rural Development determines the individual may be financially capable of qualifying for credit with or without a guarantee.
11. Disclosure of names, home addresses, social security numbers, and financial information to lending institutions that have a lien against the same property as Rural Development for the purpose of the collection of the debt. These loans can be under the direct and guaranteed loan programs.
12. Referral to private attorneys under contract with either Rural Development or with the Department of Justice for the purpose of foreclosure and possession actions and collection of past due accounts in connection with Rural Development.
13. It shall be a routine use of the records in this system of records to disclose them to the Department of Justice when: (a) The agency or any component thereof; or (b) any employee of the agency in his or her official capacity where the Department of Justice has agreed to represent the employee; or (c) the United States Government, is a party to litigation or has an interest in such litigation, and by careful review, the agency determines that the records are both relevant and necessary to the litigation and the use of such records by the Department of Justice is therefore deemed by the agency to be for a purpose that is compatible with the purpose for which the agency collected the records.

NOTICE TO APPLICANT REGARDING PRIVACY ACT INFORMATION- CONTINUED

14. Referral of names, home addresses, social security numbers, and financial information to the Department of Housing and Urban Development (HUD) as a record of location utilized by Federal agencies for an automatic credit prescreening system.

15. Referral of names, home addresses, social security numbers, and financial information to the Department of Labor, State Wage Information Collection Agencies, and other Federal, State, and local agencies, as well as those responsible for verifying information furnished to qualify for Federal benefits, to conduct wage and benefit matching through manual and/or automated means, for the purpose of determining compliance with Federal regulations and appropriate servicing actions against those not entitled to program benefits, including possible recovery of improper benefits.

16. Referral of names, home addresses, and financial information to financial consultants, advisors, or underwriters, when Rural Development determines such referral is appropriate for developing packaging and marketing strategies involving the sale of Rural Development loan assets.

17. Rural Development, in accordance with 31 U.S.C. 3711(e)(5), will provide to consumer reporting agencies or commercial reporting agencies information from this system indicating that an individual is responsible for a claim that is current.

18. Referral of names, home addresses, home telephone numbers, social security numbers, and financial information to escrow agents (which also could include attorneys and title companies) selected by the applicant or borrower for the purpose of closing the loan.

19. Disclosures pursuant to 5 U.S.C. 552a(b)(12): Disclosures may be made from this system to consumer reporting agencies as defined in the Fair Credit Reporting Act (15 U.S.C. 168a(f) or the Federal Claims Collection Act (31U.S.C. 3701(a)(3)).