



110 Marble Street, West Rutland, Vermont 05777  
802-438-2303 fax: 802-438-5338

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Thank you for your interest in our Housing Rehab Program.

With support from the Vermont Community Development Program, NeighborWorks® America and our own Regional Revolving Loan Fund, we are authorized to finance housing rehabilitation for homeowners and landlords in Rutland, Addison and Bennington Counties.

For single-family homeowners to qualify, they must be below 80% of State of Vermont median income, have reasonably good credit and demonstrate the ability to repay. Homeowners must also agree to address all health and safety issues affecting their property. Every effort is made to make loan payments fit within the homeowner's budget.

Energy efficiency services are available to homeowners below 120% of county median income. Energy services include energy audits, insulation, air sealing, and renewable energy products.

In conjunction with these loans, some grants and loans are available through the Vermont Housing and Conservation Board for the purpose of Lead-based Paint Hazard Reduction. These grants are subject to the same income guidelines, and if the property is sold within three years of project completion, the grant money must be paid back.

A Construction Specialist will be assisting you through the construction process. The Construction Specialist will perform a building inspection, prepare specifications and cost estimates, put the job out to bid to reliable contractors and assist you in contractor selection. When the work is started, he will monitor for quality control and oversee payouts.

Please fill out and return the enclosed forms so that we can get the process started. One of us will be calling you in the coming weeks to set up an appointment for a building inspection and a financial interview to see if you qualify for our programs. A list of documents that you will need is provided.

If you have any questions, or require further assistance, please call me at 802-438-2303 x222. You can learn more about our program at our website - <http://www.nwwvt.org>.

Again, thank you for your interest in our program.

Sincerely,

A handwritten signature in black ink, appearing to read "Joel".

Joel Pliner  
Housing Rehab Loan Specialist

## NeighborWorks® of Western Vermont

### REQUIRED DOCUMENTATION FOR REHAB LOANS

(As applicable and available)

#### 1. Proof of Income:

- Most recent Federal Income Tax returns, including W-2s
  - Form 1040
  - Schedule C (for self employed borrowers)
  - Schedule E (for rental property owners)
- Most recent month's pay stubs with YTD totals. Employer's name, address and phone #.
- Benefit Statement from Social Security Administration or other source.
- Documentation of alimony or child support
- Statement from pension income
- Operating Income and Expense Statement for rental properties
- If self-employed, Current Income and Expense Statement

#### 2. Home Ownership

- Warranty Deed or Mortgage Deed
- Property Tax Bill
- Mortgage statement showing monthly amount and current balance.
- Homeowner's insurance policy
- Appraisal.
- Mobile Home Bill of Sale

#### 3. Liabilities

- Statement of mortgage account(s) including current balance, payment, rate and term.
- Personal loan statements
- Credit card statements
- Other liabilities and regular monthly obligations
- Alimony and Child Support payments

#### 4. Household expenses. (documents not required)

- Average monthly utility costs.
- Insurance premiums
- Regular medical expenses
- Child care

#### 5. Other

- Copy of driver's license or photo ID
- Recent bank statement
- Bankruptcy papers
- Divorce decree
- Letters of explanation for bad debt

**Rutland West Neighborhood Housing Services, Inc.**  
d/b/a  
**Neighborworks® of Western Vermont**

## **PRIVACY POLICY**

NeighborWorks® of Western Vermont values your trust. Protecting your confidential information is important to us. This notice describes our policy regarding the collection and disclosure of personal information.

NeighborWorks® of Western Vermont does not sell or share any personal information with commercial companies for the purpose of marketing their products to you.

### **WHAT INFORMATION WE COLLECT**

Personal information means information that identifies an individual and is not otherwise publicly available information. This includes personal financial information, such as credit history, income, employment history, financial assets, bank account information, financial debts, Social Security Number, and other information you provide on a Personal Profile or Loan Application.

We collect the personal information in order to provide financial fitness, counseling, counseling to prepare you for applying for a home mortgage from a conventional lender, counseling to prevent foreclosure, and our own lending for down payment assistance, closing costs, home rehab, or other purposes related to home purchase or foreclosure prevention.

### **RESTRICTION ON DISCLOSURE OF PERSONAL INFORMATION**

In general, Rutland West and the NeighborWorks®HomeOwnership Center discloses personal information only when necessary to provide services to you, or when allowed by law.

We may disclose the following kinds of personal information about you:

- ◆ Information we receive from you on applications for a loan or other product or service, such as name, address, telephone number, social security number, assets and income
- ◆ Information about your transactions with us, such as your loan balance payment history and parties to your transactions
- ◆ Information we receive from third parties such as credit bureaus, including information about your credit worthiness and your credit history.

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, reversed mortgages, or home equity loans
- ◆ Other service providers with whom we may coordinate efforts in order to make efficient use of resources such as NETO (Weatherization) PATH (Emergency Shelter Assistance), VHCH, RD (Rural Development), VHCB (Vermont Housing Conservation Board) VCIL (Vermont Center for Independent Living), or other non profit community resources.
- ◆ Other third parties when the information is provided to help complete a transaction initiated by you, such as reporting a payoff on a loan, or to otherwise administer our business.
- ◆ Other third parties involved in program review, auditing, research, or oversight purposes.

We may disclose personal information about you to third parties as permitted by law, such as auditors in connection with a financial audit of us, to government entities, in response to subpoenas, and to credit bureaus.

In material intended for public distribution, such as newspaper articles, Rutland West publications, press releases, or reports to funding sources, it is sometimes useful to illustrate our services by highlighting our work with a family or individual. In those cases we will specifically seek your permission to use any personal information.

**MEDICAL INFORMATION**

We will not use or share personally identifiable medical information about you for any purpose other than that, which is authorized by you.

**PROTECTING THE CONFIDENTIALITY OF YOUR PERSONAL INFORMATION**

All NeighborWorks® of Western Vermont employees are required to use strict standards of care regarding the confidentiality of your personal information as outlined in Personnel Policies. Employees not adhering to our policies are subject to disciplinary action. We maintain physical security procedures to safeguard the confidentiality and integrity of personal information in our possession and to guard against unauthorized access. Our safeguards comply with federal regulations to guard your personal information.

**IF YOU WANT MORE INFORMATION**

If you have any questions regarding our Privacy Policy, please contact the Fund Manager of the NeighborWorks® HomeOwnership Center at (802-438-2303) or write to NeighborWorks® of Western Vermont, P.O. Box 655, West Rutland, VT 05777.

**I/We have received a copy of NeighborWorks® of Western Vermont’s Privacy Policy**

**Borrower \_\_\_\_\_ Date \_\_\_\_\_**

**Borrower \_\_\_\_\_ Date \_\_\_\_\_**

# NeighborWorks® of Western Vermont

## AUTHORITY TO VERIFY INFORMATION

I authorize the HomeOwnership Center, a program of Neighborworks® of Western Vermont, to verify my bank accounts, employment, outstanding debts, present or previous mortgages, to order a consumer credit report, and to make any other inquiries pertaining to my qualification for a mortgage loan.

My signature(s) below authorize the HomeOwnership Center to release information in their possession to a potential Lender, for the purpose of determining eligibility for mortgage financing. This information includes, but is not limited to: information regarding income, credit debt or other information either received from us or gathered from other sources.

I hereby authorize the loan servicer to release certain information related to the servicer's own credit experience with me to the HomeOwnership Center. Information which may be released to the HomeOwnership Center includes but is not limited to:

Original Loan Amount	Monthly Payment	Current Balance
Payment History	Payment Due Date	Amount Past Due
HUD-1 Statement		

I hereby authorize the HomeOwnership Center to make a recommendation concerning appropriate action regarding my loan, which may assist the servicer in determining whether to restructure my loan or offer other extraordinary services that may result in preserving my long-term home ownership.

Authorization is further granted to the credit-reporting agency or mortgage lender to use a photostatic reproduction of this form, if required, to obtain any information necessary to complete my consumer credit report and determine my financial status.

**Privacy Act Notice: this information is to be used by the agency collecting it or its assignees in determining whether you qualify as a prospective mortgagor under its program. It will not be disclosed outside the agency except as required and permitted by law.**

I/we fully understand that it is a Federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements concerning any of the above facts as applicable under the provisions of Title 18, United State Code, Section 1001, et seq.

_____ Borrower Signature	_____ Date	_____ Borrower Social Security #	_____ date of birth
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_____ Co-Borrower Signature	_____ Date	_____ Co-Borrower Social Security #	_____ date of birth
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**NEIGHBORWORKS® OF WESTERN VERMONT**  
110 Marble Street, West Rutland, Vermont 05777

**SERVICE AGREEMENT FOR HOUSING REHAB ASSISTANCE**

**Request** - I have applied for a loan and/or construction assistance through NeighborWorks® of Western Vermont (NWWVT). In connection with this application, I understand that NWWVT will be inspecting my property and serving as project facilitator. If my application for a loan is funded, NWWVT staff will provide a full range of construction management services

**Partnership** - I understand that it is my responsibility to approve plans and specifications, review bids, select a contractor or contractors, sign contracts, change orders, and approve all pay-outs as arranged with the NWWVT construction manager. I understand that NWWVT will hold all funds in a construction escrow account and that no disbursement will be made without the written approval of both the construction manager and myself. I also understand that while NWWVT staff will make every reasonable effort to solicit my decisions for each phase of the project, if I am not available, the construction manager may be required to make project decisions on my behalf.

**Hold Harmless** - While NWWVT makes every effort to work with reliable contractors and monitor the performance of those contractors, NWWVT construction management services are not a guarantee of any type, and NWWVT is not responsible for the quality of work or workman's performance. I agree to hold harmless and indemnify RW NHS, its employees, members, officers, and directors, in connection with actions performed by them which would reasonably be associated with property inspection, consultation, technical advice, financial counseling, loan processing, and any latent or patent defects in construction work performed as part of this project.

\_\_\_\_\_

Homeowner

\_\_\_\_\_

Date

\_\_\_\_\_

Homeowner

\_\_\_\_\_

Date

**NeighborWorks® of Western Vermont**

110 Marble Street, West Rutland, Vermont 05777

Tel: (802) 438-2303 Fax: (802) 438-5338 nwwvt@nwwvt.org

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**Housing-Rehab Assistance Program  
Financial Intake Form**

*This is NOT an application for a loan. It is intended for counseling purposes and to determine eligibility for our programs only. All information provided will be held in strictest confidence by NeighborWorks® of Western Vermont.*

Date \_\_\_\_\_ Client Code \_\_\_\_\_

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

Social Security # \_\_\_\_\_ Social Security # \_\_\_\_\_

Date of Birth \_\_\_\_\_ Date of Birth \_\_\_\_\_

Mailing Address \_\_\_\_\_

Property Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Other Phone \_\_\_\_\_ Other Phone \_\_\_\_\_

Email \_\_\_\_\_

Dependent Children Living at home \_\_\_\_\_ Ages \_\_\_\_\_

Other members of household \_\_\_\_\_

Race \_\_\_\_\_ Race \_\_\_\_\_

US Born? \_\_\_\_\_ US Born? \_\_\_\_\_

Disabled? \_\_\_\_\_ Disabled? \_\_\_\_\_

Education \_\_\_\_\_ Education \_\_\_\_\_

Type of Rehab Requested: \_\_\_\_\_

## Income Information

### EMPLOYMENT INCOME

indicate Borrower "B" or Co-Borrower "C"

Employer (B/C): \_\_\_\_\_

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

Position: \_\_\_\_\_ Years: \_\_\_\_\_ In this line of work: \_\_\_\_\_

Base Pay: \_\_\_\_\_ Income \_\_\_\_\_ (Annual/Monthly)

Employer (B/C): \_\_\_\_\_

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

Position: \_\_\_\_\_ Years: \_\_\_\_\_ In this line of work: \_\_\_\_\_

Base Pay: \_\_\_\_\_ Income \_\_\_\_\_ (Annual/Monthly)

Employer (B/C): \_\_\_\_\_

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

Position: \_\_\_\_\_ Years: \_\_\_\_\_ In this line of work: \_\_\_\_\_

Base Pay: \_\_\_\_\_ Income \_\_\_\_\_ (Annual/Monthly)

### ALL OTHER HOUSEHOLD INCOME

(Social Security, Disability, Pension, Business Income, Rental Income, Child Support, etc)

Source (B/C) \_\_\_\_\_ Monthly Amount: \_\_\_\_\_

Source (B/C) \_\_\_\_\_ Monthly Amount: \_\_\_\_\_

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Source (B/C) \_\_\_\_\_ Monthly Amount: \_\_\_\_\_

Source (B/C) \_\_\_\_\_ Monthly Amount: \_\_\_\_\_



**ESTIMATED MONTHLY LIVING EXPENSES**

Electricity	_____	_____
Phone	_____	_____
Fuel (Type _____)	_____	_____
TV	_____	_____
Water & Sewer	_____	_____
Child Care	_____	_____
Auto Insurance	_____	_____
Life Insurance	_____	_____
Health Insurance	_____	_____
Doctors, Prescriptions, etc	_____	_____
Other _____	_____	_____

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**ASSETS:**

Bank accounts (institution, account number, est. balance):

Checking \_\_\_\_\_

Savings \_\_\_\_\_

Other Assets \_\_\_\_\_

Other real estate owned: \_\_\_\_\_

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Have you ever declared bankruptcy? \_\_\_\_\_ Type: \_\_\_\_\_ Date: \_\_\_\_\_

Are there any judgments against you? \_\_\_\_\_

Are there any liens against your property? \_\_\_\_\_

How much do you feel you can afford for a loan payment? \_\_\_\_\_

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I/We certify that the information provided in this application is true and acknowledge that any intentional or negligent misrepresentation of the information contained in this application may disqualify my/our eligibility for this loan.

Applicant Signature: \_\_\_\_\_ date \_\_\_\_\_

Co-Applicant Signature: \_\_\_\_\_ date \_\_\_\_\_