

NOTE: Please Submit a check payable to RurAL CAP for \$35.00 for the Applicant and \$35.00 for the Co-Applicant.

Cash will cannot be accepted.

Revision Date: 4/11/25

### PRE-SCREENING APPLICATION FORM

# Rural Alaska Community Action Program, Inc. (NMLS #396638) Mutual Self-Help Housing Program



44539 Sterling Hwy, Suite 206, Soldotna, AK 99669 Phone: 907-260-3451 FAX: 907-260-3452

Physical Address: Physical Address:	E-mail Address:	Address:
Date of Birth: Date of Birth:  Mailing Address: Mailing Address:  Physical Address: Physical Address:	 E mail Addross:	Address:
Date of Birth: Date of Birth:  Mailing Address: Mailing Address:		
Date of Birth: Date of Birth:	 Physical Address:	al Address:
Date of Birth: Date of Birth:		
	Mailing Address:	
Social Security Number: Social Security Number:		
Tall Name		
Applicant Co-Applicant  Full Name: Full Name	Full Name	

### **Employment/Income Information**

## **Applicant**

## **Co-Applicant**

Employer:	Employer:
Job Title:	Job Title:
Date of Hire:	Date of Hire:
How long have you worked in this profession?	How long have you worked in this profession?
Gross Monthly Income (before taxes):	Gross Monthly Income (before taxes):
Hourly wage hours worked per week	Hourly wage hours worked per week
If employed less than 2 years, please show past employment For two full years including dates employed:	If employed less than 2 years, please show past employment For two full years including dates employed:
Do you receive a PFD?	Do you receive a PFD?
Do you receive other income (include APA, SSI, SSDI, Native Dividends, Senior Benefits, Retirement Income)? Monthly Amount Received:	Do you receive other income (include APA, SSI, SSDI, Native Dividends, Senior Benefits, Retirement Income)?  Monthly Amount Received:
Do you receive food stamps (SNAP)? If yes, how much?	Do you receive food stamps (SNAP)? If yes, how much?
What is your marital status?	What is your marital status?
☐ Married	☐ Married
□ Separated	□ Separated
☐ Unmarried (Includes single, divorced, widowed)	☐ Unmarried (Includes single, divorced, widowed)
Do you have prior marriages?	Do you have prior marriages?
Do you have a final dissolution/divorce decree?	Do you have a final dissolution/divorce decree?
Do you pay Child Support? If yes, how much?	Do you pay Child Support? If yes, how much?
Do you currently have a pending court case?	Do you currently have a pending court case?
f yes, please explain (child custody, divorce, etc.)	If yes, please explain (child custody, divorce, etc.)

	and how much do you pay per month?  Provider and how much do you	pay per in	
	Assessment of Commitment		
	Assessment of communicati	Yes	No
1.	Do you have reliable transportation available to get to and from the building site?		
2.	Are you physically able to do light construction work?		_
3.	Are you able to provide consistent child care for your children?		_
	Can you realistically work a minimum of 35 hours per week per family unit?		
4.	Call you realistically work a minimum of 33 flours per week per family drift:	_	_
	Residence Information	Yes	No
1	Do way yout?		
1.	Do you rent?	_	_
2.	Are you related to your landlord?		
3.	Do you receive Section 8 vouchers?		
4.	If you rent, how much do you pay each month?		
5.	Who is your landlord and their contact number?		
6.	What is your landlord's address and e-mail address?		
7.	How long have you lived at this address?		
8.	If you have lived at this address less than 2 years, please provide physical address, landlord inf	formation	and dates you live
9.			
		Yes	No
10.	Do you own a home?	Yes	No
10. 11.	Do you own a home?  Does your current residence have running water and/or sewer?	Yes	No
10. 11. 12.	Do you own a home?  Does your current residence have running water and/or sewer?  Does your current residence have complete kitchen facilities?	Yes	No
10. 11. 12.	Do you own a home?  Does your current residence have running water and/or sewer?  Does your current residence have complete kitchen facilities?  How many bedrooms does your current residence have?	Yes	No
10. 11. 12. 13.	Do you own a home?  Does your current residence have running water and/or sewer?  Does your current residence have complete kitchen facilities?  How many bedrooms does your current residence have?  If you own a home, is it a mobile home, lack running water/sewer, power, electric, or heat?  Financial Information	Yes	No
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11. 12. 13. 14. 15. 16. 17.	Do you own a home?  Does your current residence have running water and/or sewer?  Does your current residence have complete kitchen facilities?  How many bedrooms does your current residence have?	Yes	No
10. 11. 12. 13. 14. 15. 16. 17.	Do you own a home?  Does your current residence have running water and/or sewer?  Does your current residence have complete kitchen facilities?  How many bedrooms does your current residence have?  If you own a home, is it a mobile home, lack running water/sewer, power, electric, or heat?  Financial Information  Has applicant or co-applicant had a bankruptcy?  If you have had a bankruptcy, please specify when it was discharged:  Has applicant or co-applicant had a judgment?  If you have had a judgment, please indicate when it was paid in full:  If the judgment is not paid in full, are you making payments? Please provide information below	Yes	No
10. 11. 12. 13.	Do you own a home?  Does your current residence have running water and/or sewer?  Does your current residence have complete kitchen facilities?  How many bedrooms does your current residence have?  If you own a home, is it a mobile home, lack running water/sewer, power, electric, or heat?  Financial Information  Has applicant or co-applicant had a bankruptcy?  If you have had a bankruptcy, please specify when it was discharged:  Has applicant or co-applicant had a judgment?  If you have had a judgment, please indicate when it was paid in full:	Yes	No

Do you pay out of pocket for child care? If yes, who is your

Do you pay out of pocket of child care? If yes, who is your

22. Do yo	22. Do you have paid collections?									
23. Pleas	23. Please explain reason behind collections and how you propose to satisfy them:									
24. Do yo	24. Do you have any rental payments made over 30 days late in the past 2 years?									
•	If yes, how many payments have been late?									
25. Do yo	25. Do you have monthly payments to a third party not disclosed on your credit report, i.e. car payments, rent to own, medical									
	ents?					_			l de les es	
26. If yes	to 22	above, ple	ease it	emiz	e who you pa	ay,	the amount you pa	y for each debt, and	how much longe	r you have to pay:
						_				
							Optional Informat	ion		
Vou are not re	auired	l to furnis	h the f	ollov	ving informa	tior	hut: are encoura	ged to do so. The lav	nrovides that a	lender may not
	•				_			ish it. If you choose t		
							uce the cost of you	•	,	,
Ethnicity:	J				·		,			
Applicant:		Hispani	c or La	tino	İ		Not Hispanic or La	atino		
Co-Applicant:		Hispani	c or La	tino	I		Not Hispanic or La	atino		
Race:										
Applicant:		American	Indian	or A	Alaskan Nativ	re	☐ Asian	☐ Black or Africa	an American	
					Pacific Islande		■ White			
Co-Applicant:		American	Indian	or A	Alaskan Nativ	e	☐ Asian	☐ Black or Africa	an American	
		Native Ha	waiian	or F	Pacific Islande	er	□ White			
<u>Sex:</u>										
Applicant:		Male			I		Female			
Co-Applicant:		Male			l		Female			
I do not wish t	o prov	ide this in	nforma	tion						
Are you a vete	ran?									
Applicant:		Yes		3 1	No					
Co-Applicant:		Yes		J 1	No.					
If you are Alasi	ka Nati	ive or Am	erican	India	an. do vou ha	ive	a BIA card?			
Applicant:		Yes			lo		a bii t dai a .			
Co-Applicant:		Yes	. [	) N	10					
If you are Alack	ca Nati	ivo or Am	orican	India	an ulhatious		huibal affiliakian an	4/		
	Na Mati	ve or Am	erican	muic	an, what is yo	Jur	tribal alliliation and	d/or native corporati	on information?	
Lacknowledge	that Li	understar	nd that	the	information	con	stained on this form	n will be used for pre	corooning only	Final Laur
								ge loan application is		
							302 mortga	Se louir application is	Sabilitated IOI II	SVICVV.
Applicant's Sigi	nature							Co-Applicant's Signation	gnature	

Co-Applicant's Signature



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### **CONSUMER AUTHORIZATION AND RELEASE**

I hereby authorize CoreLogic Credco, LLC ("CREDCO") to obtain my consumer report/credit information, credit risk scores and other enhancements to my consumer report (hereinafter collectively referred to as "Report") from one or more of the three national credit repositories (Equifax, Experian, Transunion) and provide a copy of the Report to my housing counseling agency, Rural Alaska Community Action Program, Inc. ("Counselor") for Counselor to provide housing counseling services. This authorization is intended to comply with a consumer report request as set forth in 15 U.S. C. 1681b(a)(2).

I acknowledge that the Report is provided "AS IS" AND THAT CREDCO MAKES NO REPRESENTATION OR WARRANTY, EXPRESS OR IMPLIED, INCLUDING, BUT NOT LIMITED TO, IMPLIED WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE AND IMPLIED WARRANTIES ARISING FROM A COURSE OF DEALING OR A COURSE OF PERFORMANCE WITH RESPECT TO THE ACCURACY, VALIDITY, OR COMPLETENESS OF THE REPORT OR THAT IT WILL MEET MY NEEDS AND CREDCO EXPRESSLY DISCLAIMS ALL SUCH REPRESENTATIONS AND WARRANTIES.

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If one or more of the provisions, or a portion of a provision of this document are held for any reason to be invalid, illegal or unenforceable, such invalidity or illegality or unenforceability will not affect any other provisions of this document, and this document will be construed as if such invalid, illegal or unenforceable provision had not been contained herein.

ate:		
	(Signature)	
	Print Name	

## Please provide the following information:

Two Year History of your Residence and Landlord information - <u>listed chronologically</u>.

Please include physical addresses and dates you lived there (move in and move out dates), name or andlord or property owner and the Landlord's address, phone, fax, and e-mail contact information. Please use full dates (month/day/year):		

Please provide a two-Year History of your Employment information - <u>listed chronologically</u>. Please use full dates (month/day/year). Include:

- Dates where you were not employed or going to school (beginning and ending dates)
- Employer Name
- Dates Worked (hire date and ending date, please use Month/Day/Year)

<ul> <li>Job Title</li> <li>Payroll Contact Name, Phone Number, Fax Number, and E-mail contact information</li> </ul>

## Employment/Income Information For Adult Household Members living in the home - ages 18 or older

Please submit a copy of this page for all household members, 18 or older, who are NOT the applicant or co-applicant

- All 10 questions must be answered, if not applicable, write N/A
- ALL household members 18 or older must provide information, even if they are claimed as a dependent by the applicant or co-applicant

old Member's Name:			
Are you a FULL-TIME Student?	Yes	No	(please circle one)
Do you receive W-2 wages?	Yes	No	(please circle one)
Employer:	(if you work	multiple	jobs, include ALL employment info
Employer Contact Phone Number:			
Employer Address:		_	
Employer E-Mail OR Fax Number:			
Gross Monthly Income (before taxes):	Hourly wage	Hour	s worked per week
Do you receive a PFD?	Yes	No	(please circle one)
Do you receive other income (SSI, SSDI, Child Supp	ort, APA, spousal support,	self-emp	loyed income, unemployment, etc.
	Yes	No	(please circle one)
If you receive other income, please list from where	e and how much you recei	ve per mo	onth:
			-
	Are you a FULL-TIME Student?  Do you receive W-2 wages?  Employer:  Employer Contact Phone Number:  Employer Address:  Employer E-Mail OR Fax Number:  Gross Monthly Income (before taxes):  Do you receive a PFD?  Do you receive other income (SSI, SSDI, Child Supperson of the process of the proce	Do you receive W-2 wages?  Employer:	Are you a FULL-TIME Student?  Do you receive W-2 wages?  Yes  No  Employer:



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### Disclosure to Client for HUD Housing Counseling Services Rural Alaska Community Action Program, Inc. (RurAL CAP)

### Services Offered:

Our agency provides the following fee-free\* HUD one-on-one housing counseling services: pre-purchase counseling and financial literacy credit counseling, foreclosure prevention, and disaster recovery. Our agency also provides the following group education workshop: home maintenance education.

\*Associated fees only include the \$35 credit report. If you are unable to pay the fee or paying the fee will result financial difficulty, you may request a Hardship Waiver. Please ask us for more information about this offer.

### Relationships with Industry Partners:

Our agency has financial or exclusive relationships, or both, with specific industry partners, including:

- <u>Rural Community Assistance Corporation</u> is a Technical and Management Assistance provider and a grant provider for down payments and closing cost assistance
- Housing Assistance Council provides the Self-help Home Opportunity Program (SHOP) down payment, closing
  cost assistance funding, and funding for lot acquisition and development for RurAL CAP's Mutual Self-Help
  Housing Program
- Alaska Housing Finance Corporation provides the Operating Expense Assistance Grant and Homeownership Development Program (HDP) grant and is an assistance provider for down payments and closing costs
- <u>Enterprise</u> contributed a 12-month grant for the purpose of RurAL CAP to become a Housing and Urban Development (HUD) certified housing counseling agency and contributed supplemental program overhead
- Wells Fargo Bank provides the agency with grants to support housing counselor wages
- <u>City of Soldotna</u> through CARES Act Funding, provided Mutual Self-Help Housing Program funds to bridge the gap in construction costs due to COVID-19
- HUD provides HDP funding and SHOP funding
- <u>USDA Rural Development</u> provides a 523 Technical Assistance grant for overhead to manage and operate the mutual self-help housing program and 502 direct mortgage loan funding for the Mutual Self-Help Housing Program's construction costs and certified packaging services
- <u>Denali Commission</u> provides funding for program overhead for our new housing and rehabilitation programs.

### No Client Obligation:

The client is not obligated to receive, purchase, or use any other services offered by RurAL CAP or its exclusive partners to receive housing counseling services.



### Alternatives:

We may provide information on alternative services, programs, and products available to you, if applicable and known by our staff.

#### **Personal Information:**

Client files are kept in a secured filing system online and printed information is kept in a locked cabinet in a locked office. Please be aware that your client files may be reviewed by HUD as part of your approval but no personal information is recorded. Information is only shared with partners to secure loan funds for each client when they are eligible to purchase a home.

Potential partners include: USDA Rural Development, Alaska Community Development Corporation (ACDC) for the Homeownership Opportunities Program down payment and closing cost assistance, Alaska Housing Finance Corporation for down payment and closing cost assistance through the HDP program, Rural Community Assistance Corporation for down payment and closing cost assistance, and audits completed to ensure compliance with Secure and Fair Enforcement for Mortgage Licensing (SAFE) Act as required by the State of Alaska and Nationwide Mortgage Licensing System (NMLS) guidelines.

·
Date
Signature
ephonic session. YES or NO (circle)