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FOR OFFICE USE ONLY	
Staff initials: _____	Date received: _____
Pay type: _____	Date received: _____
CMAX ID: _____	HC sheet ID: _____
Class signing up for: _____	

First Time Homebuyer Education Class Intake

Participant One	Participant Two
Name:	Name:
Address:	Address:
City:	City:
State/Zip:	State/Zip:
Phone (daytime):	Phone (daytime):
Phone (evening):	Phone (evening):
Email:	Email:
Date of Birth:	Date of Birth:
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female Veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No Disabled? <input type="checkbox"/> Yes <input type="checkbox"/> No Female head of household? <input type="checkbox"/> Yes <input type="checkbox"/> No Foreign Born? <input type="checkbox"/> Yes <input type="checkbox"/> No	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female Veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No Disabled? <input type="checkbox"/> Yes <input type="checkbox"/> No Female head of household? <input type="checkbox"/> Yes <input type="checkbox"/> No Foreign Born? <input type="checkbox"/> Yes <input type="checkbox"/> No
Race: <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> American Indian/Alaskan Native & Black/African American <input type="checkbox"/> American Indian/Alaskan Native & White <input type="checkbox"/> Asian <input type="checkbox"/> Asian & White <input type="checkbox"/> Black/African American <input type="checkbox"/> Black/African American & White <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Multi Racial	Race: <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> American Indian/Alaskan Native & Black/African American <input type="checkbox"/> American Indian/Alaskan Native & White <input type="checkbox"/> Asian <input type="checkbox"/> Asian & White <input type="checkbox"/> Black/African American <input type="checkbox"/> Black/African American & White <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Multi Racial
Ethnicity: <input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic	Ethnicity: <input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic

Participant One	Participant Two
Education: <input type="checkbox"/> Below H. S. Diploma <input type="checkbox"/> 2 Yr College <input type="checkbox"/> H.S. Diploma or G.E.D. <input type="checkbox"/> Bachelors Degree <input type="checkbox"/> Graduate Degree	Education: <input type="checkbox"/> Below H. S. Diploma <input type="checkbox"/> 2 Yr College <input type="checkbox"/> H.S. Diploma or G.E.D. <input type="checkbox"/> Bachelors Degree <input type="checkbox"/> Graduate Degree
Have you seen a copy of your credit report in the last year? <input type="checkbox"/> Yes <input type="checkbox"/> No	Have you seen a copy of your credit report in the last year? <input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know your credit score? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you know your credit score? <input type="checkbox"/> Yes <input type="checkbox"/> No

Household Information

Household size:
 Number of adults: _____
 Number of children under 6 years of age: _____
 Number of children between 6 and 18 years of age: _____

Household Type:

Single Adult Married without children
 Female-Headed Single Parent Married with children
 Male-Headed Single Parent Two or more unrelated adults

Annual household income:

<input type="checkbox"/> \$20,000 and below	<input type="checkbox"/> \$60,000 to \$70,000
<input type="checkbox"/> \$20,000 to \$30,000	<input type="checkbox"/> \$70,000 to \$80,000
<input type="checkbox"/> \$30,000 to \$40,000	<input type="checkbox"/> \$80,000 to \$90,000
<input type="checkbox"/> \$40,000 to \$50,000	<input type="checkbox"/> \$90,000 to \$100,000
<input type="checkbox"/> \$50,000 to \$60,000	<input type="checkbox"/> \$100,000 or more

Savings / Investments:

Type of Account	Name of Bank	Approximate Balance
Checking		
Savings		
Retirement		
CD/Stocks/Bonds		
Other		

Residence Type:

What type of residence do you currently live in? Single Family Two Family Unit Three Family Unit
 Condo/Townhouse Mobile Home Four or more Family Unit

What type are you planning to buy? Single Family Two Family Unit Three Family Unit
 Condo/Townhouse Mobile Home Four or more Family Unit

Referral Source:

<input type="checkbox"/> Lender	<input type="checkbox"/> Realtor	<input type="checkbox"/> State Agency
<input type="checkbox"/> Media	<input type="checkbox"/> Another Client	<input type="checkbox"/> Walk-In
<input type="checkbox"/> NeighborWorks	<input type="checkbox"/> Word of Mouth	<input type="checkbox"/> Other: _____

Where are you in the home buying process? *(please select all that apply)*

- No idea where to begin Plan to purchase a house in 3-5 years
- Plan to purchase a house within 2 years
- Plan to purchase soon / Actively looking to buy a house now *(Please answer questions below)*

Are you currently working with a real-estate agent? Yes No If yes, with whom? _____

Are you approved with a lender? Yes No If yes, with whom? _____

Type of Loan Program: MassHousing One Mortgage FHA USDA VA Other: _____

Interest Rate: _____%

Have you made an offer or signed a P&S agreement? Yes No If yes, what is the property address?

Do you have a closing date yet? Yes No If yes, when? _____

Are you purchasing a short sale property? Yes No

Are you purchasing a bank owned property? Yes No

Home Inspection (check one)

____ I/We choose to have a home inspection performed. _____ I/We choose **not** to have a home inspection performed.

THANK YOU FOR COMPLETING THIS FORM

I/We authorize NewVue Communities to:

- Obtain a copy of the Property Appraisal, Purchase and Sales Agreement, HUD-1 Settlement Statement, Final Truth-in-Lending Disclosure or any other closing documents necessary when I purchase a home from the lender who made me a loan or the title company/attorney that closed the loan and to share any information in this application for reporting purposes only.
- I/We understand that a photocopy of this authorization is as valid as the original.

Participant One Signature _____ Date _____

Participant Two Signature _____ Date _____

Is it okay to use your comments or photo in print or on our website? Yes No

If yes, may we use your name? Yes No

I/We would like to schedule an individual appointment with the Housing Counselor to review my/our credit report and to further discuss my/our options? Yes No

Yes / No Pull my credit report to review my credit for housing counseling in connection with my pursuit on a loan to purchase real property; and pull my credit report and review my credit file for informational inquiry purposes.
If you circled yes to the question above you must submit the credit report fee along with your social security numbers below.

Participant One SS#: _____ - _____ - _____

Participant Two SS#: _____ - _____ - _____