

NEIGHBORHOOD HOUSING & DEVELOPMENT CORPORATION 633 NW 8th Avenue Gainesville, FL 32601 HOMEBUYER EDUCATION (HBE) INTAKE FORM

Name:							
Last			Firs	t		Mic	ldle Initial
CURRENT PHYSICAL ADDRESS							
Street		rame and construction account of the Arthrophocythesis (April of the Assault and Assault a			······		
City		State		Zip code		Co	unty
Home: ()			Work: ()	····		
//Birth date							
Email address:							
Gender (please circle):	Male	Female					
Marital Status (please ci	rcle):	Single	Married	Divor	rced	Separated	Widowed
Race (please circle all the White, not of Hispanic Black, not of Hispanic	origin	Hispanic Asian/Paci	fic Islander	An Otl		dian/Alaskan	Native
Disabled?	Yes	No					
Are you a Veteran?	Yes	No					
Active Military?	Yes	No					
First-Time Buyer? - (N	ot owned	a home within	the last 3 years	ars)	Yes	No	
Language spoken in the	home (if	not English):			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Current Housing Arran Rent Homeowner w Living with family me	gement (printed in the printer of th	olease circle): age Hom not paying ren	eless Ho t	omeowne	r with moi	rtgage paid o	ff
Gross (before taxes) Annual 1		Income (1 otal	from all who	wiii iive i	in the nom	e): \$	
Education (please circle on Below High School Dipl High School Diploma or	oma		wo-Year Coll Bachelors Degi	~	Gra	duate Degree	
Referred to HomeOwners	hip Center	· by (please circ	ele all that app	dy):			
Print Advertisement		Bank	Govern	ment	TV		
Staff/board member		Walk-In	Friend		Rad	lio	
Are there dependents that	will be liv	ing in the hom	e? Yes	No	If yes, li	ist ages below	: (over)

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Name:						
Last CURRENT PHYSICAL ADDRES			First		Mi	ddle Initial
Street						
City				State	Zip code	
Home: ()	Property and the Control of the Cont		Work: ()	*****	
Birth date						
Email address:		***************************************				
Gender (please circle):		Fem	nale			
Marital Status (please c	circle):	Single	Married	Divorced	Separated	Widowed
Race (please circle all th	nat apply):					
White, not of Hispanio	11 .	Hispanic		Americar	n Indian/Alaska	1 Native
Black, not of Hispanio	•	-	cific Islander	Other		
Relationship to borrower	•					
Disabled?	Yes	No				
Are you a Veteran?	Yes	No				
First-Time Buyer? - (N	ot owned a	home within	the last 3 years	s) Yes	No	
ADDITIONAL INFORM	ATION 8		and the shire like the colors			
			CU	JSTOMER	CO-APPI	LICANT
Do you have a contract or	n a house at	this time?	Yes	No	Yes	No
Are you currently workin	g with a re	al-estate agen	t? Yes	No	Yes	No
AUTHORIZATION						
I/We hereby give Neighbor client-level information to Counseling grant, open file conduct follow-up with clie	the data coll s to be revie ent related to	ection system ewed for progra program eval	for the Department of the formal of the form	ent of Housing & ompliance purpormation will be I	t Urban Develops ose and provide a kept confidential.	ment (HUD) uthorization to
I/We hereby grant authority permission to obtain a copy a home. These documents	of the HUI	D-1 Settlement	Statement and o	other closing rela	ited documents w	Center hen I purchas
Customer				_	Date	
Co-Applicant		**************************************			Date	



Photo Release Form

I hereby grant Neighborhood Housing and Development Corporation permission to use my likeness in a photograph in any and all of its publications, including website entries, without payment or any other consideration.

I understand and agree that these materials will become the property of Neighborhood Housing and Development Corporation and will not be returned.

I hereby irrevocably authorize Neighborhood Housing and Development Corporation to edit, alter, copy, exhibit, publish or distribute this photo for purposes of publicizing Neighborhood Housing and Development's programs and services or for any other lawful purpose. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my likeness appears.

Additionally, I waive any right to royalties or other compensation arising or related to the use of the photograph.

I hereby hold harmless and release and forever discharge Neighborhood Housing and Development Corporation from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

I am 21 years of age and am competent to contract in my own name. I have read this release before signing below and I fully understand the contents, meaning, and impact of this release.