



**NEIGHBORHOOD HOUSING & DEVELOPMENT CORPORATION
HOMEOWNERSHIP CENTER**

633 NW 8TH AVE., GAINESVILLE, FL 32601
TELEPHONE (352) 380-9119 FAX (352)380-9170
WWW.GNHDC.ORG

Dear Homeowner:

We're so glad you took that tough first step and contacted HOPE hotline, HUD, or NHDC about your mortgage. We understand how hard that was to do and promise to work with you to find a resolution to your situation.

- The **entire packet must be completed and every form signed** before a housing counseling appointment will be scheduled. If there is a co-applicant, make sure that all of their information is provided and they have signed the forms, as well.
- Please print clearly using only **Black or Blue ink**.
- It is important to disclose all pertinent information, so we can have a complete and accurate picture of your situation and can assist you in the best way possible.

All of the requested information is the key element of resolving your financial situation. If there are questions or information you don't understand, that's okay. Do your best with it and we will go through the rest of it together. You will find there is an emphasis on being truthful. We can't help with a resolution unless we have a complete and accurate picture of your situation. A plan based on only part of your information is certain to fail.

In addition to completing this packet, please provide copies of the following supporting documentation (originals will not be accepted). Documents should be current and not more than 60 days old.

There are some specific documents you will need to locate and turn in with your intake form:

- Copy of your last mortgage statement
- Any correspondence from the mortgage company or its attorney, even if it's unopened
- Any documents from the courts or the sheriff regarding a foreclosure
- Driver's License or picture ID of all individuals on mortgage
- Social Security cards of all individuals on mortgage
- Most recent pay stubs for all employment, benefit letter, child support, etc. (Self Employed-last year's tax return)
- Last two months of all bank statements
- A hardship letter that answers the following questions:
 - What caused your situation?
 - How have you tried to fix your financial situation?
 - Why do you want to keep or sell your home?

Once your completed packet has been received and reviewed, we will contact you to schedule an appointment. You may drop off, mail, email (aconklin@gnhdc.org) or fax it in.

You have taken the first step to resolving your situation. We look forward to working with you.

Sincerely,
NHDC Housing Advisors

04/2023





FORECLOSURE INTERVENTION COUNSELING INTAKE FORM

PRIMARY APPLICANT

Please Print Clearly

FIRST NAME MI LAST NAME

STREET

CITY STATE ZIP CODE COUNTY

MAILING ADDRESS (if different from physical address)

STREET

CITY STATE ZIP CODE COUNTY

Home: (____) ____-____ **Mobile:** (____) ____-____ **Email:** _____

Social Security Number **Birth Date (MM/DD/YYYY)** **# OF YEARS AT CURRENT ADDRESS**

Race (please check all that apply):

- American Indian/Alaskan Native
- Native Hawaiian or other Pacific Islander
- Asian
- White
- Black or African American
- Other _____
- Black or African American and White
- Choose not to respond

Ethnicity: _____ **Hispanic** _____ **Non-Hispanic** _____ **Choose not to respond**

Marital Status (please circle one): Single Married Divorced Separated Widowed

Gender (please circle one): Female Male

Family/Household Size: _____ **Number of children?** _____

Primary language spoken in the home (if not English): _____

Highest Level of Education (please check highest level of education only):

- No High School Diploma
- High School Diploma
- GED
- Vocational Certificate
- Some College, didn't graduate
- Associates Degree
- Bachelor's Degree
- Masters Degree
- Doctorate
- Choose not to respond

****Annual Family or Household Income (REQUIRED!): \$ _____ ****

Veteran? Yes No

Active Military? Yes No

Household Type (please select the most accurate)?

- Female headed single parent household
- Male headed single parent household
- Single adult
- Two or more unrelated adults
- Married with children
- Married without children
- Other

Reason for Default (Please, circle most significant reason):

- Business venture failed
- Death of a family member
- Divorce/Separation
- Increase in Expense
- Increase in loan payment
- Loss of income
- Medical issues
- Not in Default
- Reduction in Income (amount reduced \$_____)
- Other: _____

Property Type:

- Co-op
- Manf./Mobile home – does not own land
- Manf./Mobile home – does own land
- Multiplex (2-4 unites)
- Townhouse/Condo
- Single Family

Are there non-dependents who live in the home? Yes No

If yes, list below:

Relationship	Age.	Relationship	Age
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How did you hear about us? (If you were referred by a bank, which one?) _____

PRIMARY APPLICANT EMPLOYMENT — Last 2 Years Please Print Clearly

Primary Employer: _____

Title	Hire Date
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Street	City	State	Zip Code
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Phone: (_____) _____ – _____ Part Time or Full Time (Please circle one) Years in Profession: _____

Gross Income (before taxes): \$ _____

Is this amount paid ___hourly ___weekly ___every two weeks ___twice a month ___monthly?

Previous Employer: _____

Title	Hire Date
-------	-----------

Street	City	State	Zip Code
--------	------	-------	----------

Phone: (_____) _____ – _____ Part Time or Full Time (Please circle one) Years in Profession: _____

Gross Income (before taxes): \$ _____

Is this amount paid ___ hourly ___ weekly ___ every two weeks ___ twice a month ___ monthly?

Continue listing previous employers on a separate sheet of paper if within past 2 years.

CO-APPLICANT**Please Print Clearly**

FIRST NAME

MI

LAST NAME

STREET

CITY

STATE

ZIP CODE

COUNTY

Relationship to Applicant: Spouse Parent Sibling Friend Partner Other: _____**Home:** (____) ____ - _____**Mobile:** (____) ____ - _____**Email:** _____**Social Security Number** _____ - _____ - _____**Birth Date (MM/DD/YYYY)** ____/____/____**Race** (please check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> American Indian/Alaskan Native | <input type="checkbox"/> Black or African American |
| <input type="checkbox"/> Native Hawaiian or other Pacific Islander | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Asian | <input type="checkbox"/> Black or African American and White |
| <input type="checkbox"/> White | <input type="checkbox"/> Choose not to respond |

Gender (please circle one): Female Male**Ethnicity:** _____ **Hispanic** _____ **Non-Hispanic** _____ **Choose not to respond****CO-APPLICANT EMPLOYMENT — Last 2 Years****Please Print Clearly**

Primary Employer: _____

Title _____ Hire Date _____

Street _____ City _____ State _____ Zip Code _____

Phone: (____) ____ - _____ Part Time or Full Time (Please circle one) Years in Profession: ____

Gross Income (before taxes): \$ _____

Is this amount paid ___ hourly ___ weekly ___ every two weeks ___ twice a month ___ monthly?

Previous Employer: _____

Title _____ Hire Date _____

Street _____ City _____ State _____ Zip Code _____

Phone: (____) ____ - _____ Part Time or Full Time (Please circle one) Years in Profession: ____

Gross Income (before taxes): \$ _____

Is this amount paid ___ hourly ___ weekly ___ every two weeks ___ twice a month ___ monthly?

Continue listing previous employers on a separate sheet of paper if within past 2 years.

ADDITIONAL INFORMATION	CUSTOMER	CO-APPLICANT
Are you currently in Chapter 13 bankruptcy? If yes, beginning date? _____	Yes No	Yes No
Payment Amount? _____		End date? _____
Have you had a Chapter 7 bankruptcy? If yes, when was it discharged? _____	Yes No	Yes No
Are you about to receive additional funds (e.g., tax refunds,)? If yes, list the source and how much? _____	Yes No	Yes No

LOAN INFORMATION	
Lien (Mortgage) Holder Information:	
Lien Holder Name: _____	
Type: (Please Circle One)	FHA, Fannie Mae, Freddie Mac, Conventional, Other: _____
Monthly Payment (Including Escrow): \$ _____	Monthly Payment (Excluding Escrow): \$ _____
Interest Rate : _____	Past Due Amount:\$ _____ Principal Balance:\$ _____
Months Remaining: _____	Date of Last Payment Made: _____ Date Hardship Started: _____

BUDGET WORKSHEET

INCOME	PLEASE PRINT CLEARLY	
TYPE OF INCOME	PRIMARY APPLICANT Monthly Amount	CO-APPLICANT Monthly Amount
Salary		
Child Support		
Rental Income		
Social Security		
Pension Income		
Public Assistance		
Self-employment Income		
Dependent SSI Income		
Disability Income		
Other Income (Alimony, etc.)		
TOTAL		
ASSETS		
Checking account(s)		
Savings account(s)		
Cash		
CDs		
Retirement account		
401K/ 403B		
Stocks and Bonds		
Money Market account(s)		
Other Liquid Funds		
TOTAL		

FIXED EXPENSES

SAVINGS	MONTHLY AMT
Savings Account	
Retirement Fund	
Goals/Other	
Subtotal	
HOUSING	MONTHLY AMT
Rent/Mortgage	
Utilities	
Phones (Cell & Home)	
Internet/Cable	
Subtotal	
DEBT	MONTHLY AMT
Auto Loan	
Credit Cards	
Other Loans	
Subtotal	
INSURANCE	MONTHLY AMT
Auto	
Life	
Renters/Home	
Health/Dental	
Subtotal	
KIDS FIXED	MONTHLY AMT
Day Care	
Allowance	
Child Support	
Babysitter	
Subtotal	
OTHER FIXED	MONTHLY AMT
Subtotal	

FLEXIBLE EXPENSES

FOOD/OTHER	MONTHLY AMT
Groceries	
Meals Eaten Out	
Pet Care	
Tobacco/Cig/Alcohol	
Subtotal	
HOUSING	MONTHLY AMT
Maintenance	
Cleaning supplies/Lawn	
Other	
Subtotal	
TRANSPORTATION	MONTHLY AMT
Gas	
Maintenance	
Subtotal	
PERSONAL CARE	MONTHLY AMT
Toiletries/Hairdresser	
Clothing/Repair/Laundry	
Shoes	
Nails/Other	
Subtotal	
RECREATION	MONTHLY AMT
Hobbies	
Moves/Books/Other	
Vacation	
Other	
Subtotal	
OTHER FLEXIBLE	MONTHLY AMT
Tithes/Charities	
Gifts/Allowances	
Doctor / Rx	
Subscriptions	
Subtotal	

TOTAL MONTHLY EXPENSES \$ _____
(add up all the subtotals)



CLIENT SESSION AGREEMENT AND EXPECTATIONS

As a housing counseling program participant, please affirm your role and responsibility with the following disclosures. Please initial, sign, and date each area where requested.

Neighborhood Housing & Development Corporation (NHDC) and its housing counselors and partners agree to provide the following services:

- Educational classes to help you address your personal financial goals;
- A preliminary evaluation and/or analysis of your current financial needs, creating an accurate household spending plan (budget);
- Presentation and explanation of reasonable options available to address your financial concerns;
- Referral to additional outside resources or services as needed;
- Confidentiality, honesty, respect and professionalism in all services provided;
- A credit report review (fee applicable), including what action is needed to improve your score; and
- An action plan outlining the specific steps both you and your counselor will take to help you achieve your desired outcome(s).

NHDC and its housing counselors expect from clients to be in compliance with the following terms:

_____ I/We will commit 100% to this counseling process, showing up on time to each appointment, prepared with action plan assignments complete and focused, ready for the next steps.

_____ I commit to being coachable and continuing the process even if it is uncomfortable at times and will be responsible for my results.

_____ I will communicate succinctly and to the point, not veering off on tangents that can pull my session away from helping me with my goals.

_____ I/We will always submit honest and complete information to the housing counselor, whether verbally or in writing.

_____ I/We will provide all necessary documentation within the timeframe as indicated on the Intake Form and as requested during counseling sessions.

_____ I/We will contact the housing counselor immediately about any relevant changes in my/our situation.

_____ It is understood that if I/we are late to the appointment, no extra time will be given and the appointment will end at the scheduled time. If I/we are unable to attend an appointment, I/We must notify our housing counselor within 24 hours of the scheduled appointment time. It is understood that I/We will not be allowed more than two (2) cancelled/rescheduled appointments.

_____ I/We understand if an appointment is missed without proper notification more than once, such an action will subject to the dismissal of our case.

_____ I understand I am responsible for creating and implementing my own physical, mental and emotional well-being, decisions, choices, actions and results. As such, I agree that NHDC or any of its employees are not and will not be liable for any actions or inaction, or for any direct or indirect result of any services provided by NHDC. I also understand that the NHDC does not provide therapy and does not substitute for therapy if needed, and does not prevent, cure, or treat any mental disorder or medical disease.

_____ I/We understand that the housing counselors of NHDC are not a substitute for professional advice by legal, mental, medical or other qualified professionals and will seek independent professional guidance for such matters.

_____ I/We understand that failure to comply with this entire agreement, NHDC reserves the right to terminate its service and assistance.

Applicant Signature

Co Applicant Signature

Applicant Printed Name

Co Applicant Printed Name

Date

Date



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AUTHORIZATION RELEASE

DATE _____

To Whom It May Concern:

I, _____ (your name), authorize
_____ (mortgage lender), to discuss information regarding my mortgage,
loan # _____, with a representative of Neighborhood Housing and Development
Corporation.

Sincerely;

Borrower Print Name: _____

Signature: _____

Co-Borrower Print Name: _____

Signature: _____

Property Address: _____

Mailing Address: _____

Telephone: _____

Borrower SSI#: _____ Co Borrower SSI#: _____

FROM:

<p>Andre Parchment Executive Director Ext. 102 aparchment@gnhdc.org www.gnhdc.org</p>	<p>Janice Crews Special Project Coordinator Ext. 103 jcrews@gnhdc.org</p>	<p>Russ Hirshik HomeOwnership Center Manager Ext 107 rhirshik@gnhdc.org</p>	<p>Cheryl Beardsley Chief Financial Officer Ex. 101 cbeardsley@gnhdc.org</p>	<p>Anne Conklin Admin Assistant Ext 100 aconklin@gnhdc.org</p>
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DISCLOSURE AND THIRD-PARTY AUTHORIZATION

Neighborhood Housing Development Corporation (NHDC) is a private, not-for-profit, HUD-approved housing counseling organization. The mission of NHDC is to create a cornerstone of dignity, security and opportunity through quality affordable homes and strong communities. We provide housing counseling and education services, including Pre-purchase Counseling, Credit/Budget Counseling, Financial Fitness, Homebuyer Education Workshops, as well as, Mortgage Delinquency & Default Resolution Counseling. We serve all clients regardless of income, race, color, religion/creed, sex, national origin, age, family status, disability, or sexual orientation/gender identity. We administer our programs in conformity with local, state, and federal anti-discrimination laws, including the federal Fair Housing Act (42 USC 3600, et seq.).

Our housing counseling service is a counselor-to-client or counselor-to-group activity during which the counselor completes a budget review, a credit review, a debt management review, money date, an action plan and any other activities in conjunction with the client that will assist in their management of their financial resources and housing goals. When you enter into a discussion with your housing counselor, we want you to understand the nature of the counseling relationship. The counselor has an obligation to provide you with information that will support your housing goal with the utmost care, integrity, and honesty. The following is a breakdown of how we collect, use and share information gathered by you in order to help you meet your goals. Please indicate your understanding and acceptance of this process below.

_____ I/We understand that Neighborhood Housing Development Corporation (NHDC) provides pre-purchase, financial capability, rental and/or foreclosure intervention counseling.

_____ I/We certify that all of the information submitted is true and complete. I/We have made no misrepresentations of any documents, nor did I/We omit any pertinent information needed. Verifications may be requested from our household members.

_____ I/We understand that the information provided will be used to assess my current financial situation. During the session, I will receive a written action plan consisting of recommendations for handling my finances, and possibly including referrals to other community agencies and/or businesses as appropriate.

_____ I/We understand that this one-on-one counseling service is an educational resource, offering multiple solutions in order to resolve my current personal financial or housing concerns. I/We may be referred to other services offered by the Neighborhood Housing Development Corporation (NHDC) or other agencies that may be able to assist with particular concerns identified. I/We understand that there is no obligation to use any of the services offered. I/We certify that it will be My/Our sole decision what solutions to implement as a result of the session(s) or workshops provided.

_____ I/We consent to the release of information gathered through this assessment to other local service agencies, applicable third parties and lender if it is deemed necessary to complete services with my lender, with my household or to provide data for Grantors and funders of our program.

_____ I/We understand that Neighborhood Housing Development Corporation receives Congressional funds through the NeighborWorks America, Housing and Urban Development (HUD), City of Gainesville, Wells Fargo and other local grants from financial institutions or nonprofits. As such, NHDC is required to share some of your personal information with all program administrators or their agents for purposes of program monitoring, compliance and evaluation.

_____ I/We give permission for all grant funding program administrators and/or their agents to follow-up with me within the next three years for the purposes of program evaluation.

_____ A counselor may answer questions and provide information, but not give legal advice. If I/we want legal advice, I/we will be referred out for appropriate legal assistance.

Liability Waiver Statement

_____ I/We certify and understand that I cannot hold the Neighborhood Housing Development Corporation (NHDC) staff, housing counselor, other employees or board of directors liable for any assistance they provide or any decision(s) that are made as a result of the session(s).

SIGNATURES AND ACKNOWLEDGEMENT

PRIVACY POLICY OPTIONS

Please read NHDC's Privacy Policy. Once you have read it, if you want to opt out, that is direct us not to make disclosures about your personal information (other than disclosures permitted by law) as described in the privacy notice, please indicate your preferences below.

Check the box or boxes below to indicate your privacy choices.

- Option 1** - Allow NHDC to share my personal information with third parties deemed necessary for the counseling services being provided.
- Option 2** - Limit disclosure of personal information about me to unaffiliated third parties other than nonprofit organizations involved in community development.
- Option 3** - Limit disclosure of personal information about me only to funders, government agencies or nonprofit organizations involved in community development that are used only for program review, auditing, research and oversight purposes.

ACKNOWLEDGEMENT OF FEE SCHEDULE

_____ I/We have read NHDC's Fee Schedule and are aware of the fees. I/We are responsible to pay for only those services specifically requested. I am not obligated to receive nor pay for any other services that may be offered by NHDC or its partners.

ADDITIONAL AUTHORIZATIONS

If applicable, please indicate authorizations for NHDC to:

- pull my/our credit report and review my/our credit file for informational inquiry purposes

_____/I/We have read, understand and agree to the following Neighborhood Housing & Development Corporation's:

- Client Session Agreement and Expectations
- Disclosure Statement and Third Party Authorization to Release Information
- Liability Waiver Statement
- Privacy Policy
- Conflict of Interest
- Fee Schedule

as each relates to the services being provided and the use of personal information. I/We understand that any intentional or negligent representation(s) of the information contained on this form may result in civil liability and/or criminal liability under the provisions of Title 18, United States Code, Section 1001.

I UNDERSTAND AND AGREE WITH THE TERMS OF ALL AUTHORIZATIONS AND DISCLOSURES:

Applicant Signature

Co Applicant Signature

Applicant Name Printed

Co Applicant Name Printed

Date

Date

Housing Counselor Signature

Print Name

Date



PRIVACY POLICY REGARDING PERSONAL INFORMATION

This notice describes our policy regarding the collection and disclosure of personal information.

Neighborhood Housing and Development Corporation (NHDC) values your trust and is committed to the proper management of the privacy of individuals and family's personal information. We realize that the concerns you bring to us are highly personal in nature and assure you that all information shared both orally and in writing will be managed within legal and ethical considerations. Your "nonpublic" personal information, as used in this notice, means information that identifies an individual personally and is not otherwise publicly available information. It includes personal financial information such as credit history, household income, employment history, financial assets and liabilities, and bank account information. It also includes your social security number and other information that you have provided us on any applications or forms that you have completed.

Information We Collect

We collect personal information to support our lending operations, housing and financial counseling, and to aid you in shopping for a home mortgage from a conventional lender. In addition, we collect personal information to assist you with resolving mortgage delinquency. We collect personal information about you from the following sources:

- Information that we receive from you on applications or other forms,
- Information about your transactions with us, our affiliates or others,
- Information we receive from a consumer reporting agency, and
- Information that we receive from personal and employment references.

Information We Disclose

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

- Information we receive from you on applications or other forms, such as your name, address, social security number, employer, occupation, assets, debts and income;
- Information about our transactions with us, our affiliates or others, such as your account balance, payment history and parties to your transactions; and
- Information we receive from a consumer reporting agency, such as your credit bureau reports, your credit history and your creditworthiness.

To Whom Do We Disclose

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 or home equity loans,
- Other nonprofit organizations involved in community development, but only for program review, auditing, research and oversight purposes.

We may also disclose personal information about you to third parties as permitted by law. *Prior to sharing personal information with unaffiliated third parties, except as described in this policy, we will give you an opportunity to direct that such information not be disclosed.*

Confidentiality and Security

We restrict access to personal information about you to those of our employees who need to know that information to provide products and services to you and to help them do their jobs, including underwriting and servicing of loans, making loan decisions, aiding you in obtaining loans from others, and financial counseling. We maintain physical and electronic security procedures to safeguard the confidentiality and integrity of personal information in our possession and to guard against unauthorized access. We use locked files, user authentication and detection software to protect your information. Our safeguard complies with federal regulations to guard your personal information.

PRIVACY CHOICES FORM

If you want to opt out, that is direct us not to make disclosures about your personal information (other than disclosures permitted by law) as described in this notice, please indicate your preferences on page 10 of this packet.

NHDC'S FEE SCHEDULE

As of May 1, 2023

EDUCATIONAL CLASSES

Financial Fitness Series

No Charge

The Financial Fitness Classes are interactive sessions focusing on budgeting, credit education and other personal finance topics. It is intended for clients who have an interest in improving their personal finances but need to resolve some issues keeping them from securing a mortgage.

Home Buyer Education Seminar

\$50

The Home Buyer Education (HBE) Seminar is an 8-hour session designed for households planning a home purchase within one year. Topics discussed information on financial literacy and real estate terminology; preparing for a mortgage and home purchase; down payment assistance programs; how to select a real estate professional: special veterans counseling; a complete explanation of standard purchase procedures, property inspections, insurance, escrows; laws and regulations covering your purchase including fair housing laws, predatory lending laws, laws prohibiting mortgage modification scams, and the like; financing alternatives; conventional mortgage products, budget counseling; credit counseling; how to maintain your home and protect your investment; home energy counseling; and discussion of closing costs and the HUD-1. Clients graduating from the class may be eligible for SHIP and NHDC financial assistance. Households purchasing a home within one year of HBE course completion will receive a refund of the monies paid.

COUNSELING PROGRAMS

No Charge

Pre-Purchase Housing Counseling is delivered in a confidential, one-on-one setting between you and the housing counselor. The counseling session is specific to your needs. A course of action is developed to help guide both you and the counselor to reach your determined housing goal.

Foreclosure Intervention Counseling: These services include: helping you effectively work with lender/servicers including drawing up documents for loan modification and submission of modification documents; fair lending/mortgage fraud identification, referral and reporting; loan modification procedures and programs; work-out plans; loan refinance; deed-in-lieu; deed-in lease; short sale; working with investors; using "hardest hit" funding; review of financials and how to modify living expenses to increase retained household income; what to do if your hardship application is denied by your lender/servicer; explaining what a foreclosure is, the foreclosure process and important timelines, alternatives to foreclosure; mortgage rate reduction programs; loss mitigation strategies; property retention and disposition options; hands-on counseling in delinquency; and bankruptcy information.

Rental Counseling and Education: These services include but are not limited to providing information and direct help with: renting with impaired credit; rentals for low, low income persons; excessive deposits; budget and debt counseling; financial literacy counseling and class-type education; rights of children who have been displaced due to foreclosure; rental scams; fair housing awareness, discrimination, health and safety repairs, filing complaints; NHDC program consisting of information and direct assistance with tenant rights, responsibilities and remedies; eviction mitigation; mobility counseling; resources on HUD rental programs and rent subsidy programs; lease and rental agreements; and post-occupancy matters.

OTHER SERVICES

Credit Report Review

\$48.55 per credit report/client

The credit report review includes a detailed overview of what is in your report and what is impacting your score. This review includes strategies for improving your score and how to dispute incorrect information. A credit report will be pulled by NHDC only after we have received written authorization from the client and the fee for the report has been paid.

NHDC'S CONFLICT OF INTEREST STATEMENT

A director, employee, officer, contractor, or agent of NHDC shall not engage in activities that create a real or apparent conflict of interest. Such a conflict would arise if the director, employee, officer, contractor, agent, his or her spouse, child, general partner, or organization in which he or she serves as an employee (other than with the participating counseling agency), or with whom he or she is negotiating future employment, has a direct interest in the client as a landlord, broker, or creditor, or originates, has a financial interest in, services, or underwrites a mortgage on the client's property, owns or purchases a property that the client seeks to rent or purchase, or serves as a collection agent for the client's mortgage lender, landlord, or creditor.

A director, employee, officer, contractor, or agent of NHDC shall not refer clients to mortgage lenders, brokers, builders, or real estate sales agents or brokers in which the officer, employee, director, his or her spouse, child, or general partner has a financial interest, neither may they acquire the client's property from the trustee in bankruptcy or accept a fee or any other consideration for referring a client to mortgage lenders, brokers, builders, or real estate sales agents or brokers.

A director, employee, officer, contractor, or agent of NHDC or any member of his or her immediate family shall avoid any action that might result in, or create the appearance of, administering the housing counseling operation for personal or private gain; providing preferential treatment to any organization or person; or undertaking any action that might compromise the agency's ability to ensure compliance with the requirements of this part and to serve the best interests of its clients.

NHDC must provide to all clients a disclosure statement that explicitly describes the various types of services provided by the agency and any financial relationships between this agency and any other industry partners. The disclosure must clearly state that the client is not obligated to receive any other services offered by the organization or its exclusive partners. Furthermore, NHDC will provide information on alternative services, programs, and products when needed.