

# NeighborWorks® HomeOwnership Center of Dutchess County

An innovative approach to providing all of the services and training that customers need in one location to shop for, purchase, rehabilitate, insure, and maintain a home.

291 Mill Street  
Poughkeepsie, NY 12601  
845.454.9288 (phone)  
845.485.1957 (fax)

## OUR LOCAL PARTNERS



NeighborWorks® America  
Bank of America  
Citizen's Bank  
City of Poughkeepsie  
Dutchess County Real Estate Brokers  
First Niagara

M&T Bank  
NYS Office of the Attorney General  
Private Donors  
Rhinebeck Bank  
TD Bank  
Trustco Bank  
Ulster Savings Bank  
Hudson Valley Federal Credit Union

*NHC-DC is a project of Hudson River Housing, Inc.*

## CENTER STAFF

**Mary F. Linge**  
*Director of Real Estate Development*

**Matthew Kelly**  
*Administrative Clerk*

**Kim Gianna**  
*Housing Counselor*

**Lauren McLaughlin**  
*HomeOwnership Center Manager*

**Lashonda Denson**  
*Housing Counselor*

**Adrienne Haynes**  
*Housing Counselor*

## **COURSES & SERVICES**

### **Credit & Budget Counseling**

One-on-one counseling is offered for customers in need of assistance in raising their credit score to pre-qualify for a mortgage. Methods in calculating household income and expenses leads to setting goals and making an action plan to meet them.

### **Pre-Purchase Counseling**

Your Housing Counselor will help to prepare you to purchase a home through personal one-on-one counseling sessions.

Your Housing Counselor will maintain a relationship with you throughout the entire home buying process

### **Pre-Purchase Fast Track**

This program is a time-condensed version of **The Home Club**, and is only available to individuals and families that are currently in the mortgage process with a lender. Sessions are scheduled on an as needed basis.

### **Financial Fitness**

This course is designed to teach individuals and families how to decrease debt and increase savings. Participants will gain an understanding of expenses, financial resources, how credit works and how to correct deficiencies. This 3 hour course is followed up with a one-on-one follow-up session with a housing counselor to review personal credit report and set goals for a stronger financial future.

### **Keys to HomeOwnership**

The goal of this course is to assist first-time homebuyers in identifying barriers to pre-qualifying for a mortgage and setting goals to overcome them. This one-hour classroom session is followed up with a one-on-one session with a housing counselor to set a path to homeownership.

### **THE HOME CLUB**

The goal of this course is to provide homebuyers with comprehensive information on the entire home buying process in order to be secure in their new home purchase.

This course meets one night per month for 90 minutes over a five-month period and feature local experts. involved in the home buying process.

### **The ABC's of Being a Landlord**

This one-hour course is designed to assist home buyers decide if they want to pursue owning a multi-family home. The course is a basic overview of the rewards, risks and responsibilities of being a landlord

### **Landlord Training**

This service is offered to anyone who is in the process of buying an owner-occupied multi-family home. The one-on-one session details the variables involved in becoming a landlord.

### **Grant Eligibility & Education**

The Federal Home Loan Bank of New York offer grants for first-time homebuyers to use towards down payment and/or closing cost assistance.

Your Housing Counselor will explain what grants are currently available and assist in determining if your household is eligible.

### **Foreclosure Prevention Counseling**

A program that provides foreclosure prevention counseling services to homeowners facing difficulty meeting their mortgage obligation

### **Strategies to Avoid Foreclosure**

This workshop is designed to help participants understand the foreclosure process in New York State, and also outlines what options there are to prevent foreclosure.

**Hudson River Housing, Inc.**

**NeighborWorks®  
HomeOwnership Center  
of Dutchess County**  
291 Mill Street  
Poughkeepsie, NY 12601  
845.454.9288 phone  
845.485.1957 fax

Thank you for inquiring about our home buyer education program. This is an exciting time for you, and it is a privilege to guide you through this journey. The enclosed brochure outlines the comprehensive programs and services offered through the NeighborWorks HomeOwnership Center of Dutchess County. Hudson River Housing provides all of the services and training that customers need to shop for, purchase, rehabilitate, insure and maintain a home.

To date, HRH has assisted over 675 households in obtaining their first home. We look forward to working with you to design a blueprint for your path to homeownership.

To enroll in the program, please complete the enclosed enrollment form (front and back) & Service Deliver Agreement and return it along with the credit report fee of \$20 (checks should be made out to Hudson River Housing) in the envelope provided. Once received, we will be in touch with you to schedule your first visit with us.

Please call if you have any questions. We look forward to working with you!

Sincerely,



Lashonda Denson  
Housing Counselor

Enc.



# NeighborWorks HomeOwnership Center of Dutchess County Enrollment

(P) PARTICIPANT

(C) CO-PARTICIPANT

|                                 |                |           |
|---------------------------------|----------------|-----------|
| First Name                      | Middle Initial | Last Name |
| Mailing Address                 |                |           |
| City,                           | State          | Zip       |
| County                          |                |           |
| Physical Address (if different) |                |           |
| City,                           | State          | Zip       |
| County                          |                |           |
| E-Mail                          |                |           |

|                                 |                |           |
|---------------------------------|----------------|-----------|
| First Name                      | Middle Initial | Last Name |
| Mailing Address                 |                |           |
| City,                           | State          | Zip       |
| County                          |                |           |
| Physical Address (if different) |                |           |
| City,                           | State          | Zip       |
| County                          |                |           |
| E-Mail                          |                |           |

|                        |            |               |     |
|------------------------|------------|---------------|-----|
| Home Phone             | Work Phone | Cell Phone    | Fax |
| Social Security Number |            | Date of Birth | Age |

|                        |            |               |     |
|------------------------|------------|---------------|-----|
| Home Phone             | Work Phone | Cell Phone    | Fax |
| Social Security Number |            | Date of Birth | Age |

U. S. Citizen  
  Foreign Born  
  Resident Alien  
  Other

Single  
  Married  
  Legally Separated  
  Separated  
  Divorced

Military Status:  
  Active  
  Veteran

Degree:  
  HS/GED  
  College  
  Vocational

Owned a Home in the past three years?   
 Paying Rent?

Have mortgage Prequalification   
 Has a purchase offer been accepted?

U. S. Citizen  
  Foreign Born  
  Resident Alien  
  Other

Single  
  Married  
  Legally Separated  
  Separated  
  Divorced

Military Status:  
  Active  
  Veteran

Degree:  
  HS/GED  
  College  
  Vocational

Owned a Home in the past three years?   
 Paying Rent?

Have mortgage Prequalification   
 Has a purchase offer been accepted?

You are not required to furnish this information, but are encouraged to do so. You may not be discriminated against on the basis of this information, nor on whether you choose to furnish it. If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation. If you do not furnish ethnicity, race or sex, it is required by Federal regulations to note the information on the basis of visual observation or surname. If you do not wish to furnish the information, please check below.

**(P) RACE/NATIONAL ORIGIN**

I do not wish to furnish this information

American Indian, Alaskan Native  
  White

Asian  
  Hispanic/Latino

Black or African American  
  Not Hispanic/Latino

Native Hawaiian or Other Pacific Islander

**(P) SEX:**  
  Female  
  Male

**(C) RACE/NATIONAL ORIGIN**

I do not wish to furnish this information

American Indian, Alaskan Native  
  White

Asian  
  Hispanic/Latino

Black or African American  
  Not Hispanic/Latino

Native Hawaiian or Other Pacific Islander

**(C) SEX:**  
  Female  
  Male

| LIST ADDITIONAL HOUSEHOLD MEMBERS AND DEPENDENTS (Do not include Participant and Co-Participant listed above) |       |       |              |   |   |          |
|---|-------|-------|--------------|---|---|----------|
| First and Last Names  | Age   | DOB   | Relationship | Student   | Earn/Receive \$                                       | Comments |
| _____   | _____ | _____ | _____        | Y <input type="checkbox"/> N <input type="checkbox"/> | Y <input type="checkbox"/> N <input type="checkbox"/> | _____    |
| _____   | _____ | _____ | _____        | Y <input type="checkbox"/> N <input type="checkbox"/> | Y <input type="checkbox"/> N <input type="checkbox"/> | _____    |
| _____   | _____ | _____ | _____        | Y <input type="checkbox"/> N <input type="checkbox"/> | Y <input type="checkbox"/> N <input type="checkbox"/> | _____    |
| _____   | _____ | _____ | _____        | Y <input type="checkbox"/> N <input type="checkbox"/> | Y <input type="checkbox"/> N <input type="checkbox"/> | _____    |
| _____   | _____ | _____ | _____        | Y <input type="checkbox"/> N <input type="checkbox"/> | Y <input type="checkbox"/> N <input type="checkbox"/> | _____    |

Total Household Size: \_\_\_\_\_  
  Single Adult  
  2 Adults  
  Single Parent  
  2-Parents  
  Section 8 to Homeownership

**(P) EMPLOYMENT**

Employer Name \_\_\_\_\_  
 Union: Y  N   
 Self-Employed Y  N

Mailing Address \_\_\_\_\_  
 Human Resources Phone # \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Position \_\_\_\_\_  
 Date Started \_\_\_\_\_

Gross Pay Per Paycheck \_\_\_\_\_

Pay Frequency (Check One)  
 Check all that apply to annual pay

Weekly  
  Bi-Weekly  
  Overtime  
  Commission

Monthly  
  Bi-Monthly  
  Cash Tips  
  Bonus

Other \_\_\_\_\_

**(C) EMPLOYMENT**

Employer Name \_\_\_\_\_  
 Union: Y  N   
 Self-Employed Y  N

Mailing Address \_\_\_\_\_  
 Human Resources Phone # \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Position \_\_\_\_\_  
 Date Started \_\_\_\_\_

Gross Pay Per Paycheck \_\_\_\_\_

Pay Frequency (Check One)  
 Check all that apply to annual pay

Weekly  
  Bi-Weekly  
  Overtime  
  Commission

Monthly  
  Bi-Monthly  
  Cash Tips  
  Bonus

Other \_\_\_\_\_

# NeighborWorks HomeOwnership Center of Dutchess County Enrollment

## (P) PART-TIME/SECOND/SEASONAL JOB

## (C) PART-TIME/SECOND/SEASONAL JOB

Union: Y  N   
 Self-Employed Y  N   
 Employer Name \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Position \_\_\_\_\_  
 Date Started \_\_\_\_\_

Union: Y  N   
 Self-Employed Y  N   
 Employer Name \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Position \_\_\_\_\_  
 Date Started \_\_\_\_\_

Gross Per Paycheck \_\_\_\_\_  
 Pay Frequency (Check One)  
 Weekly     Bi-Weekly     Monthly  
 Bi-Monthly  
 Check all that apply to annual pay  
 Overtime     Commission  
 Cash Tips     Bonus  
 Other \_\_\_\_\_

Gross Per Paycheck \_\_\_\_\_  
 Pay Frequency (Check One)  
 Weekly     Bi-Weekly     Monthly  
 Bi-Monthly  
 Check all that apply to annual pay  
 Overtime     Commission  
 Cash Tips     Bonus  
 Other \_\_\_\_\_

OTHER INCOME (Submit supporting documentation i.e. Child Support Order, Award Letters, Statements, Etc.)

| Type               | P/C | Monthly  | Comments | Type           | P/C | Monthly  | Comments |
|--------------------|-----|----------|----------|----------------|-----|----------|----------|
| Alimony            |     | \$ _____ | _____    | SSI            |     | \$ _____ | _____    |
| Child Support      |     | \$ _____ | _____    | SSD            |     | \$ _____ | _____    |
| Disability         |     | \$ _____ | _____    | Unemployment   |     | \$ _____ | _____    |
| Insurance/Annuity  |     | \$ _____ | _____    | VA Benefits    |     | \$ _____ | _____    |
| Interest/Dividends |     | \$ _____ | _____    | Worker's Comp. |     | \$ _____ | _____    |
| Pension            |     | \$ _____ | _____    | Other          |     | \$ _____ | _____    |
| Public Assistance  |     | \$ _____ | _____    | Other          |     | \$ _____ | _____    |
| Social Security    |     | \$ _____ | _____    | Other          |     | \$ _____ | _____    |

**Savings Account Balance:**

Account 1: \$ \_\_\_\_\_  
 Account 2: \$ \_\_\_\_\_

**LIST ALL PRIOR JOB PERIODS OF UNEMPLOYMENT FROM THIS YEAR AND LAST (account for all of last year's W-2s & 1099s)**  
(Match the names of employers/agencies to W-2s and 1099-Gs, Etc. (i.e. job title, unemployed, homemaker, student, disabled, ill, etc.))

|       |                             |                 |            |          |
|-------|-----------------------------|-----------------|------------|----------|
| P/C   | Employer/Agency/Institution | Position/Status | Start Date | End Date |
| _____ | _____                       | _____           | _____      | _____    |
| _____ | _____                       | _____           | _____      | _____    |
| _____ | _____                       | _____           | _____      | _____    |
| _____ | _____                       | _____           | _____      | _____    |

Credit Scores: (P) \_\_\_\_\_ (C) \_\_\_\_\_

I/We authorize the NeighborWorks® HomeOwnership Center of Dutchess County to obtain a credit report in connection with my/our request to enroll in the program. I/We understand that this is not an application for credit and that enrollment in this program does not guarantee approval of any mortgage for which I/we may apply. Furthermore, I/we authorize the NeighborWorks® HomeOwnership Center of Dutchess County to share the information provided by me/us on this enrollment form with financial institutions, their subsidiaries and partners.

Participant's Signature \_\_\_\_\_ Date \_\_\_\_\_ Co-Participant's Signature \_\_\_\_\_ Date \_\_\_\_\_

How Did Your Hear About Us

|  |  |  |
|--|--|--|
| <input type="checkbox"/> NHC-DC customer                     | <input type="checkbox"/> Hudson River Housing Web site | <input type="checkbox"/> HUD/Fannie Mae  |
| <input type="checkbox"/> Legal services of the Hudson Valley | <input type="checkbox"/> Referred by a bank            | <input type="checkbox"/> Dutchess County. FTHB   |
| <input type="checkbox"/> A Hudson River Housing program      | <input type="checkbox"/> If yes, bank name _____       | <input type="checkbox"/> City of Poughkeepsie FTHB   |
| <input type="checkbox"/> Walk-in                             | <input type="checkbox"/> Referred by a realtor         | <input type="checkbox"/> Other (please explain) _____  |
|  | <input type="checkbox"/> If yes, realtor name _____    | <input type="checkbox"/> Radio, <input type="checkbox"/> TV <input type="checkbox"/> Billboard |

**Hudson River Housing, Inc.**  
Pre-Purchase Service Delivery

Our staff has been specially trained in Pre-Purchase Counseling and Education. Hudson River Housing offers a full range of educational services designed to prepare you to purchase and maintain a home. You will be assigned a Housing Counselor to assist you in assessing your situation and gaining a full understanding of what options may be available to you.

**WHAT HRH STAFF WILL DO -**

**At the appointment with the Housing Counselor, HRH will:**

- 1.) Conduct ourselves in a professional manner, maintaining respect and confidentiality with all parties.
- 2.) Gather and analyze the documents we requested from you to obtain an accurate assessment of your current situation.
- 3.) Review your current Credit Report to obtain an accurate review of your obligations.
- 4.) We will analyze your monthly income and expenses, based on the household budget information you provided.
- 5.) Create and deliver an action plan to identify specific recommendations for tasks that can be carried out by you going forward.
- 6.) May refer to other housing services of HRH or another agency or agencies as appropriate that may be able to assist with particular concerns that have been identified. The customer is not obligated to use or purchase any of the services offered.
- 7.) May provide information and education on numerous loan products and housing programs as appropriate. The customer is in no way obligated to choose any of these particular loan products or housing programs.

**WHAT HRH STAFF WILL NOT DO -**

*1.) Make decisions for you.*

We will do our best to ensure that you understand all of the options available to you, but we will not take responsibility for any decisions made. That responsibility rests solely with you.

*2.) Give legal advice.*

As Housing Counselors, we are frequently asked questions that should only be answered by qualified attorneys. It is not our desire to withhold information, but we simply cannot offer advice, or opinions on legal matters.

**HRH Customer Rights & Responsibilities**

A resolution cannot be reached without the active participation of the customer. Therefore, the customer is responsible to:

- 1.) Treat all parties with courtesy and respect.
- 2.) Provide accurate and complete information.

**CUSTOMER AFFIRMATION**

**I have read the HRH Customer Service Agreement. I request to participate in this program, with a full understanding of the parameters, procedures and responsibilities described herein.**

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

\_\_\_\_\_  
**Co-Borrower**

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

\_\_\_\_\_  
**HRH Staff**

**Hudson River Housing, Inc.**  
**Privacy Policy**

NeighborWorks HomeOwnership Center of Dutchess County is committed to assuring the privacy of individuals and/or families who have contacted us for assistance. We realize that the concerns you bring to us are highly personal in nature. We assure you that all information shared both orally and in writing will be managed within legal and ethical considerations. Your “nonpublic personal information,” such as your total debt information, income, living expenses and personal information concerning your financial circumstances, will be provided to creditors, program monitors, and others only with your authorization. We may also use anonymous aggregated case file information for the purpose of evaluating our services, gathering valuable research information and designing future programs.

**Types of information that we gather about you**

- Information we receive from you orally, on applications or other forms, such as your name, address, social security number, assets, and income;
- Information about your transactions with us, your creditors, or others, such as your account balance, payment history, parties to transactions and credit card usage
- Information we receive from a credit reporting agency, such as your credit history.

**You may opt-out of certain disclosures**

1. You have the opportunity to “opt-out” of disclosures of your nonpublic personal information to third parties (such as your creditors), that is, direct us not to make those disclosures.
2. If you choose to “opt-out”, we will not be able to answer questions from your creditors. If at any time, you wish to change your decision with regard to your “opt-out”, you may call us at (845) 454-9288 and do so.

**Release of your information to third parties**

1. So long as you have not opted-out, we may disclose some or all of the information that we collect, as described above, to your creditors or third parties where we have determined that it would be helpful to you, would aid us in counseling you, or is a requirement of grant awards which make our services possible.
2. We may also disclose any nonpublic personal information about you or former customers to anyone as permitted by law (e.g., if we are compelled by legal process).
3. Within the organization, we restrict access to nonpublic personal information about you to those employees who need to know that information to provide services to you. We maintain physical, electronic and procedural safeguards that comply with federal regulations to guard your nonpublic personal information.





## Part 1: How well does this statement describe you or your situation?

| This statement describes me   | Completely               | Very well                | Somewhat                 | Very little              | Not at all               |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 1. I could handle a major unexpected expense  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. I am securing my financial future  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Because of my money situation, I feel like I will never have the things I want in life | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. I can enjoy life because of the way I'm managing my money                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. I am just getting by financially   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. I am concerned that the money I have or will save won't last                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

## Part 2: How often does this statement apply to you?

| This statement applies to me   | Always                   | Often                    | Sometimes                | Rarely                   | Never                    |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 7. Giving a gift for a wedding, birthday or other occasion would put a strain on my finances for the month | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. I have money left over at the end of the month  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. I am behind with my finances  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. My finances control my life  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

## Part 3: Tell us about yourself.

11. How old are you?  18-61  62+
12. How did you take the questionnaire?  I read the questions  Someone read the questions to me