



North Carolina Community Housing & Consulting  
PO Box 48082 Cumberland, NC 28331  
www.nccommunityhousingconsulting.com  
(910) 920-3710 FAX: (910) 868-5849

### NCCHC INTAKE FORM

Date: _____		Email: _____	
Name: <i>(please print)</i>			
Spouse/Partner: (if applicable)			
Address:	Street:	City, State	Zip Code:

How long at current address? _____	If less than 2 years, previous address: _____ _____ _____	Do you live in: ___ Rural Area ___ Urban Area	Do you: ___ Own ___ Rent ___ Live with friend/family Amt paid per month \$ _____
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Phone: _____	Home/Cell: _____ _____	Work: _____ <b>We will not contact your employer</b>
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Ethnicity: White \_\_\_ African-American \_\_\_ Hispanic \_\_\_ Asian \_\_\_ Other \_\_\_\_\_

Household English Proficiency Status: Limited \_\_\_ Not Limited \_\_\_

Marital Status	Single ___	Married ___	Divorced ___	Widowed ___	Separated ___
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Gender: M ___ F ___	Date of Birth: ___/___/_____ Age: _____	Social Security Number: <i>(required for credit counseling)</i> _____-_____-_____ _____	Number of people in your household: _____
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Spouse/Partner: Gender: M ___ F ___	Date of Birth: <b>(Spouse/Partner)</b> ___/___/_____ Age: _____	Social Security Number: <b>(Spouse/Partner)</b> <i>(required for credit counseling)</i> _____-_____-_____ _____	
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List below people who live with you.

Name	Age	Relationship	Name	Age	Relationship

Highest Grade Completed: \_\_\_\_\_

Do you receive a "Section 8" Voucher? \_\_\_ Yes \_\_\_ No

Are there individuals with disabilities in your household? \_\_\_ Yes \_\_\_ No

Do you receive Food Stamps? No \_\_\_ Yes \_\_\_ Amount \_\_\_\_\_

Place of Employment: \_\_\_\_\_ Occupation: \_\_\_\_\_

Length of Employment: \_\_\_\_\_ Years \_\_\_\_\_ Months \$ \_\_\_\_\_ Monthly Salary/Wage

(Spouse/co-Borrower) POE: \_\_\_\_\_ Occupation: \_\_\_\_\_

Length of Employment: \_\_\_\_\_ Years \_\_\_\_\_ Months \$ \_\_\_\_\_ Monthly Salary/Wage

Household Gross Annual Income: \$ \_\_\_\_\_ Monthly Net Income \$ \_\_\_\_\_





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**Are you currently working with (or plan to work with) a specific bank or lender?**

Yes \_\_\_\_ No \_\_\_\_ Do you have a Realtor? Yes \_\_\_\_ No \_\_\_\_

*If YES, please specify:*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please answer the following questions: *(These are questions you will be asked when you apply for a mortgage loan)*

Are there any outstanding judgments against you? \_\_\_\_\_

Have you declared bankruptcy or had property foreclosed on in the past 7 years? \_\_\_\_\_

Are you currently party to a lawsuit? \_\_\_\_\_

Are you presently delinquent/in default on any Federal debt or any other loan, mortgage, financial obligation, student loan, bond, or loan guarantee? \_\_\_\_\_

Do you have a Checking Account? Y \_\_\_\_ N \_\_\_\_ Savings Account? Y \_\_\_\_ N \_\_\_\_

Emergency Fund? Y \_\_\_\_ N \_\_\_\_

How much have you currently saved towards a down payment? \$\_\_\_\_\_

Your Bank/Financial Institution(s)

\_\_\_\_\_  
\_\_\_\_\_

**FOR NCCHC USE ONLY:**

Received HomeBuyer Education Certificate Yes \_\_\_\_ No \_\_\_\_

Date:

Certificate No.:

Facilitator(s) \_\_\_\_\_

North Carolina Community Housing & Consulting, Inc., has my permission to use mine and my family's photograph in reports sent to grantors.

*I certify that the facts stated above are true and correct to the best of my knowledge.*

\_\_\_\_\_  
Name 1 Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name 2 Signature

\_\_\_\_\_  
Date

