

Wesley Community Development Corporation
A United Methodist Organization
Serving the People of Western North Carolina
“Building Communities of Grace and Hope”

1321C Dixie Drive
Statesville, North Carolina 28677

(704) 924-8942 (800) 723-1005

Fax: (704) 883-0099

<http://www.wesleycdc.com>

To Applicants of Homeownership:

Thank you for applying to Wesley Community Development Corporation (Wesley CDC) for your housing needs. We look forward to working with you and your family as you go through the process of applying to become a homeowner.

At Wesley CDC we have very experienced staff of housing professionals who will work with you during the process of becoming a homeowner. We see this as a partnership between you and our staff at Wesley CDC. We will be there to support you along the road to becoming a homeowner, but this partnership will also require you to be actively involved.

Please call our Housing Counselor to set up an initial interview. When you come to this meeting, please bring a completed application and the supporting documentation that is discussed on the next page. It is important that you return this application as soon as possible. If you need assistance in filling out the paperwork, feel free to call our office and talk with a Housing Counselor. She will be more than happy to assist you with the completion of the application.

We ask that you read each document carefully and make certain that the information that you are providing is correct. Take the time to verify your answers and sources. If there are incorrect items on the form this will slow down your application.

After your application is submitted it will be assessed to determine your eligibility for our program. If you are eligible, we will then proceed with budgeting, financial literacy and debt management training.

Owning a home is one of the most important steps that you will take in your life. The road to becoming a homeowner can be challenging, but the reward of becoming a homeowner is worth the time spent to achieve this goal. The staff of Wesley CDC will be here along the way to help you through his process. If you have any questions, please do not hesitate to call.

We look forward to working with you.

Sincerely,

Roy Helm
President

WESELY COMMUNITY DEVELOPMENT CORPORATION
Building homes for Today and Hope for Tomorrow

Dear Applicant:

Thank you for your request for an application from Wesley CDC. Before you apply, please be sure that you are aware of the following restrictions that may apply to your situation. They will be explained by a staff member during your interview.

1. Applicants must be at 80% or below the Income Guidelines established by the Department of Housing and Urban Development and the North Carolina Housing Trust. Information is available on these guidelines by calling Wesley CDC
2. We must receive certification of income.
3. Applicants must own and occupy the property for at least 10 years.
4. Priority will be given to applicants whose special needs include large families living in the house, handicapped residents, and children or elderly at risk.

While our goal is to take care of your needs as soon as possible, the process involved with doing our job is long and may take as long as a year to eighteen months to complete. If you have an emergency, you may need to look to others for help in order to take care of your needs as soon as possible.

The most important step to help us process your application is to complete and return all of the items listed below. Attached are the application forms that you need to complete. We require all of the following if applicable:

- A completed application (enclosed) Be sure to sign the last page.
- A signed form for any Social Security, SSI or Disability that is received by any member of the family.
- Signed Certification of Total Household Income (enclosed)
- Signed Authorization to Release Information (enclosed) for all adult members in the household.
- Copy of your last two years federal and state tax returns include W2's
- Current paystub for the last 4 weeks of all wage earners in your household who are 18 or older.
- Last 2 months checking and or savings account statement All pages needed.
- A court filed copy of divorce/separation papers, and child support papers.
- Written verification of childcare expenses.
- A permission to pull credit report form signed by all clients.

Note: Copies of documents will be made, and all originals returned to you.

If you have any questions, please call 800-723-1005.

Wesley Community Development Corporation
A United Methodist Organization
Serving the People of Western North Carolina
“Building Communities of Grace and Hope”

1321C Dixie Drive
Statesville, North Carolina 28677
(704) 924-8942 (800) 723-1005
Fax: (704) 883-0099
<http://www.wesleycdc.com>

HOMEOWNERSHIP APPLICATION

DATE: _____

I. GENERAL INFORMATION

Applicant Name _____ SS# _____ DOB _____ Age: _____
Applicant Name _____ SS# _____ DOB _____ Age: _____
Drivers License # _____ State _____ Drivers License # _____ State _____
Address: _____ City: _____ State _____ Zip: _____ County _____
Phone: Home _____ Work _____ Co-applicant work _____
Cell: _____ Email _____
Marital Status: Single Married Separated Divorced Widowed
Female head of household: Yes No
#Handicapped Persons in Household _____
Contact Person _____ Contact Phone _____

II. RESIDENTIAL INFORMATION

Name of Landlord _____ Telephone _____
Address _____ Length of time _____ Monthly Rent \$ _____
If less than 2 years at present location, give information for previous addresses and landlords to cover previous two years.
Name of Landlord: _____ Telephone _____
Address _____ Length of time _____ Monthly Rent \$ _____
Name of Landlord: _____ Telephone _____
Address _____ Length of time _____ Monthly Rent \$ _____

III. Employment

Employer_____

Address_____ City_____ ST, Zip_____

Telephone_____ Supervisor_____

Start date_____

Position_____ Length of time_____ Hrs. per week_____

Wages_____ Per: (circle one) Hour Week Month Year

Employment Income of Other Household Members:

Employer of **Co-Applicant**:_____ Address_____

Telephone_____ Position_____ Length of Time_____

Hrs per week _____ Wages: (circle one) Hour Week Month Year

Employer/**Other Members**_____

Address_____

Telephone_____ Position_____ Length of Time_____

Hrs per week _____ Wages: (circle one) Hour Week Month Year

PLEASE PROVIDE THE FOLLOWING INCOME INFORMATION FOR ALL HOUSHOLD MEMBERS IF IT APPLIES:

Salaries & Wages_____ Business or Self Employment_____

Disability_____ Retirement/Pension_____

Unemployment_____ Social Security_____

Workman's Comp_____ Welfare_____

AFOC_____ Child Support_____

Rent Income_____ Alimony_____

SSI _____ Veterans Benefits_____

Total Monthly Income for All Household Members_____

Food Stamps_____ (do not include in total income)

IV. ASSETS:

Savings Account:

Financial Institution _____ Acct# _____ Current Balance _____

Address _____ City _____ St _____ Zip _____

Checking Account:

Financial Institution _____ Acct# _____ Current Balance _____

Address _____ City _____ St _____ Zip _____

Real Estate:

Description _____ Value _____

Retirement Account:

Description _____ Vested Value _____

Vehicles:

Make _____ Model _____ Year _____ Value _____

Make _____ Model _____ Year _____ Value _____

Make _____ Model _____ Year _____ Value _____

Stocks, Bonds, Securities:

Description _____ Value _____

Other Assets:

Description _____ Value _____

Description _____ Value _____

V. Liabilities:

List all outstanding debts such as auto loans, credit cards, department stores, furniture stores, jewelry stores, etc.

Creditor _____ Acct# _____ Balance _____

Address _____ Monthly Payment _____

Creditor _____ Acct# _____ Balance _____

Address _____ Monthly Payment _____

Creditor _____ Acct# _____ Balance _____

Address _____ Monthly Payment _____

Use back of this sheet if needed.

Creditor _____ Acct# _____ Balance _____
Address _____ Monthly Payment _____

Creditor _____ Acct# _____ Balance _____
Address _____ Monthly Payment _____

Total Liabilities _____ Are any of these past due? _____

If yes, please explain _____

use the reverse side of paper if needed.

VI. OTHER INFORMATION:

Have you ever owned a home? _____ If yes, in whose name is the deed? _____

Have you filed bankruptcy in the past seven years? _____

Are there any outstanding judgments against you? _____

Do you have daycare expenses? _____ Amount _____

Please give the name and address of one relative who would be certain to know your address and telephone number should you move from your present location:

Name of Relative _____ Relationship to you _____

Telephone: _____ Address: _____

City _____ State _____ Zip code _____

Applicant Certification:

I certify that the information given in this application is true and accurate. I hereby give permission for Wesley CDC to verify all information contained in this application through contact with employers, creditors, banks, etc. I further certify that I am aware that a credit check is necessary for the processing of my application. I hereby grant permission unto Wesley CDC to check my credit through any credit bureau or private credit agency of their choosing.

Applicant Signature

Date

Co Applicant Signature

Date

Wesley Community Development Corporation

A United Methodist Organization
Serving the People of Western North Carolina
"Building Communities of Grace and Hope"

1321C Dixie Drive
Statesville, North Carolina 28677

(704) 924-8942 (800) 723-1005
Fax: (704) 883-0099
<http://www.wesleycdc.com>

CONSENT FOR RELEASE OF INFORMATION

TO: SOCIAL SECURITY ADMINISTRATION

Name Date of Birth Social Security Number

I authorize the Social Security Administration to release information or records about me to:

Wesley Community Development Corporation
1321-C Dixie Drive
Statesville, NC 28677

(There may be a charge for releasing information)

Please release the following:

Gross Monthly Social Security Benefits, Amount, Type of benefit, and Date of Birth

Gross Monthly Supplemental Security Income Payment Amount (including state supplement), Type of Benefit and Date of Birth.

I am the individual to whom the information/record applies or that person's parent (if a minor) or legal guardian. I know that if I make any representation which I know is false to obtain information from Social Security records, I could be punished by a fine or imprisonment or both.

Signature
(Show signatures, names and address of two people if signed by mark)

CERTIFICATION OF TOTAL HOUSEHOLD INCOME

Sponsor: **Wesley Community Development Corporation**

Date: _____

Address: **1321-C Dixie Drive**

City: **Statesville**

St. **NC**

Zip **28677**

ALL PERSONS WHO INTEND TO OCCUPY THE HOUSING UNIT AND THEIR ANTICIPATED INCOMES MUST BE LISTED BELOW:

Occupant	Relationship	Age	Gender	Total Anticipated Annual Income (include child support next to each child if applicable)
			M F	
			M F	
			M F	
			M F	
			M F	
			M F	
			M F	
			M F	

Total Anticipated Annual Household Income is: \$ _____

I/We have provided verification of all anticipated Annual income and other information necessary to satisfy the requirements for occupancy for each person named herein. I/We certify that the statements and all information herein are true and complete to the best of my/our knowledge and re given under the penalty of perjury.

I/We agree that the household income, household composition, and other eligibility requirements shall be conditions of this occupancy and that failure or refusal to comply with a request for information with respect thereto shall be deemed a violation of conditions. I/We will assist in obtaining any information or documents required in verifying the statements certified herein.

The Certification of Total Household Income is to be made part of the agreement entered into by the Recipient and the Occupant(s).

Head of Household Signature

Head of Household Signature

RELEASE OF CONFIDENTIAL INFORMATION

- A. I/We _____, hereby authorize Wesley CDC to release to the agency or person designated below, and information maintained by Wesley CDC that is relevant for the purpose of providing housing assistance for my needs and/or the needs of my family.
- B. I/We _____, hereby authorize the agency or person designated below to release to Wesley CDC the information maintained by said agency or person that is relevant for the purpose of providing housing assistance for my needs and/or the needs of my family.
- C. I/We further understand that the release of this information does not guarantee that assistance will be provided but that without the information, my case cannot be processed for consideration.

D. NAME OF AGENCY OR PERSON DESIGNATED:

Any other agencies relevant to my credit standing, income or outstanding debts.

Head of Household

Spouse

Social Security Number

Social Security Number

Date

Date

Wesley Community Development Corporation

A United Methodist Organization
Serving the People of Western North Carolina
“Building Communities of Grace and Hope”

1321C Dixie Drive
Statesville, North Carolina 28677

(704) 924-8942 (800) 723-1005

Fax: (704) 883-0099

<http://www.wesleycdc.com>

CONSENT FOR RELEASE OF CREDIT INFORMATION

Name Date of Birth Social Security Number

Name Date of Birth Social Security Number

The above named individual(s) consent to allow Wesley Community Development Corporation to retrieve their credit information. This credit information will assist the staff of Wesley CDC in making a decision concerning your entry into Wesley CDC’s affordable housing program. Without this information, I/we understand that my/our case cannot be processed for consideration. I/We further understand that the release of this information does not guarantee that assistance will be provided by Wesley CDC, nor does it guarantee entry into Wesley CDC's affordable housing program.

Signature of First Client

Name_____

Address_____

Signature of Second Client

Name_____

Address_____

Wesley Community Development Corporation

Privacy Policy

Wesley Community Development Corporation is committed to protecting the privacy and security of our clients' personal information. We collect and maintain your information to enable us to complete your loan application, conduct our business in a manner consistent with federal and state laws and regulations, and satisfy legal requirements.

This policy governs Wesley Community Development Corporation's use of non-public personal customer information. Non-public personal information is defined in applicable law and generally means financial information that is identified with you that is not obtainable from a public source.

1. **How We Obtain Personal Customer Information.** In conducting our business, we collect and maintain various types of information about our clients. If we are unable to obtain such information from you, we may be prevented from processing your application and closing on the sale of your house. The types of information we collect and maintain include:
 - Information that we receive directly from you in applications and other forms that you deliver to us, and from our communications with you. This may include information such as your address, telephone number, Social Security numbers, assets, income, debt, etc.
 - Information we receive from other sources regarding your employment, credit history, or verifying information you have given us. This may include information such as your employment history, loan balances and payment history, credit card balances and payment history, rental payment history, etc.
 - Information we receive from credit bureaus regarding your credit history and credit worthiness (such as the amount of your total debt, your payment history, etc.)
 - Information we obtain from public sources. This may include information contained in federal, state and local records such as recorded liens on your property, real estate taxes and assessments, tax liens, etc.
2. **How We Use Your Personal Information.** We use your personal information only for legitimate business purposes in compliance with applicable laws and regulations. We do not sell customer information (described above) to non-affiliated third parties for marketing purposes. The following summarizes the principal ways in which Wesley Community Development Corporation uses such information.
 - a. **Within Wesley Community Development Corporation.** Within Wesley Community Development Corporation, we use your non-public information to conduct our business in a safe and sound manner. For example, we use information gathered in loan applications to ensure that we underwrite loans in a prudent manner.
 - b. **With Unaffiliated Third Parties.** Wesley Community Development Corporation will sometimes disclose your personal information to companies or entities unaffiliated with Wesley Community Development Corporation. This might occur in the following circumstances:

- i. **Third Party Services.** On a confidential basis, we may disclose your personal information to companies that provide services to Wesley Community Development Corporation.
- ii. **Lenders, Title Companies, Escrow Companies, etc.** On a confidential basis, we may disclose your personal information to lenders, title companies escrow companies, etc. This information may be necessary to facilitate your loan application and/or grant application.
- iii. **Legal Requirements.** We are sometimes required to disclose your personal information in order to comply with subpoenas, court orders, and legal reporting requirements.
- iv. **Fraud Prevention.** We may disclose your personal information to prevent fraud and unauthorized transactions, to resolve customer disputes, and, as necessary, to Wesley Community Development Corporation's regulators, attorneys, accountants, and auditors.

3. Protecting Personal Customer Information From Unauthorized Access.

Safeguarding your personal information is important at Wesley Community Development Corporation. We maintain systems, policies and procedures to protect your personal information from being accessed by unauthorized persons. We limit employee access to personal customer information to those with a legitimate business reason for such access. We will retain your personal information only as long as necessary to handle your loan application, conform to safe and sound business practices, or satisfy legal requirements. We train our employees in our privacy policy and procedures, and they are held accountable for adhering to them.