## Please be sure to include a <u>\$38.00</u> money order per person for a credit report. Only money orders can be accepted. This must be brought to the scheduled orientation.

			Date received:		
Applicant Last Name First	: Name Middl	e Initial	<b>Co-Applicant</b> Last Name	First Name	Middle Initial
Social Security Numbe	r		Social Security N	Number	
Date of Birth			Date of Birth		
Best contact number			Best contact number		
Email			Email		
Present Address			Present Address		
Years at present address			Years at present address		
If at present address less than two years, provide:			If at present address less than two years, provide:		
Previous Address			Previous Address		
Years at previous address			Years at previous address		
Employer's Name			Employer's Name		
Job Title			Job Title		
Employer's Address			Employer's Address		
Years there	Phone #		Years there	Phone #	ŧ
Total number of peopl Number and ages of cl Are you aware of any s If so, how are you wor Would you consider yo Does your current resi	hildren (under 18 significant issues king to resolve th our current home	3) on your credit rep nose issues? e overcrowded?	ort? How m	nany bedrooms	<u></u>
Have you been displac	ed/homeless?	Is ar	nyone in the house	ehold disabled?	
Household Income: Higher	□ \$0-\$20K	□ \$20K-\$30K	□ \$30K-\$40K	□ \$40K-50	К \$□ 50К-
Please check the areas	s in which you are	e interested in livir	ıg:		
Delawa	re:	Kent County	Sussex County	ý	
Would you like to rece	ive periodic upd	ates from us abou	t our programs, se	rvices, and ever	nts? 🗆 Yes 🗆 No
How did you hear of M	1ilford Housing D	evelopment Corpo	oration?		
х			х		
X Applicant Signature			X Co-Applicant's Signature		

\*By signing this application: (1) the applicant/co- applicant authorizes MHDC, Housing Services Department to obtain a credit report. (2) There is a \$500 loan processing fee to submit a USDA 502 application. This fee is WAIVED IN FULL for Self Help clients. If a client decides not to continue with the Self-Help program <u>after becoming eligible</u> for their loan this \$500 fee will be due in full at closing.



## MILFORD HOUSING DEVELOPMENT CORPORATION (MHDC) Supporting Document Checklist

Please be prepared bring <u>Photocopies</u> of the following documentation and/or fees to your upcoming one-on-one session. If you have any questions, please contact us at (302) 422-8255.

Proof of Income:

- \_\_\_\_\_ 4 Most Recent Paycheck Stubs
- \_\_\_\_\_ Driver's License/Photo ID/Green Card
- \_\_\_\_\_ Child Support Documentation 12-month history (printout) and court order

If applicable:

- \_\_\_\_\_ Social Security Award Letter
- \_\_\_\_\_ Food Assistance Letter
- \_\_\_\_\_ TANF Letter
- \_\_\_\_\_ Bankruptcy Documentation
- \_\_\_\_\_ Alimony

## Exhibit A CONSUMER AUTHORIZATION AND RELEASE

I hereby authorize CoreLogic Credco, LLC ("CREDCO" or "FAC") to obtain my consumer report/credit information, credit risk scores and other enhancements to my consumer report (hereinafter collectively referred to as "Report") from one or more of the three national credit repositories (Equifax, Experian, Trans Union) and provide a copy of the Report to my housing counseling agency,

("Counselor") for Counselor to provide housing counseling services. This authorization is intended to comply with a consumer report request as set forth in 15 U.S.C.1681b(a)(2).

I acknowledge that the Report is provided "AS IS" AND THAT CREDCO MAKES NO REPRESENTATION OR WARRANTY, EXPRESS OR IMPLIED, INCLUDING, BUT NOT LIMITED TO, IMPLIED WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE AND IMPLIED WARRANTIES ARISING FROM A COURSE OF DEALING OR A COURSE OF PERFORMANCE WITH RESPECT TO THE ACCURACY, VALIDITY, OR COMPLETENESS OF THE REPORT OR THAT IT WILL MEET MY NEEDS AND CREDCO EXPRESSLY DISCLAIMS ALL SUCH REPRESENTATIONS AND WARRANTIES.

I recognize that the accuracy, validity or completeness of the Report provided by CREDCO is not guaranteed by CREDCO and I hereby release CREDCO and CREDCO's parent, sister, affiliated companies, successors and assigns and its and their directors, officers, agents, employees and independent contractors (collectively, "CREDCO's Affiliates") from any liability for a n y negligence in connection with the preparation of the Report and from any loss, damages, expenses, costs or obligations of any kind and nature whatsoever suffered by me resulting directly or indirectly from the inaccuracy, invalidity or incompleteness of the Report.

I covenant not to sue or maintain any claim, cause of action, demand, cross action, counterclaim, third party action or other form of pleading against CREDCO or CREDCO's Affiliates for damages based upon the inaccuracy, invalidity or incompleteness of any Report provided by CREDCO hereunder.

If one or more of the provisions, or a portion of a provision of this document are held for any reason to be invalid, illegal or unenforceable, such invalidity or illegality or unenforceability will not affect any other provisions of this document, and this document will be construed as if such invalid, illegal or unenforceable provision had not been contained herein.

Date:

(Signature)

(Print Name)

COMP-AFS-MAR17-AH Last Updated 03/10/2017