



## HOUSING INTAKE PACKET COVER LETTER

Dear potential homeowner,

We are glad that you are taking the first step and have contacted the Midland College Business and Economic Development Center (MC BEDC) about your goal of purchasing a home.

To assist us in providing you with the most effective and efficient service, please complete the attached application packet. Please be ready to provide the following documents for each individual receiving counseling services.

- Two types of identification. (One must be a picture ID)
- Proof of Income –Pay stubs for the past 30 days.
- \$20 cash per client getting a credit report.

We are here to get you mortgage ready. If there are questions or information you don't understand, that's okay, do your best. We will review your documentation and verify that you have everything we need completed. Your application will need to be completely filled out before an appointment is scheduled. You may call us at 432-684-4309 with your questions or concerns.

We look forward to serving you!

BEDC Staff

**201 W. FLORIDA  
MIDLAND, TX 79701  
PHONE: 432.684.4309  
FAX: 432.684.4821  
bedc@midland.edu**



## HOUSING COUNSELING INTAKE FORM

Complete this form to receive free housing counseling from the BEDC.

### CLIENT INFORMATION

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Current Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Home phone is optional

Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ email: \_\_\_\_\_  
Work phone is optional

How did you hear about our services? \_\_\_\_\_

Race: \_\_\_\_\_ Number in Household: \_\_\_\_\_ Do You Live in Rural Area: Yes \_\_\_ No \_\_\_

Gender: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Education: \_\_\_\_\_  
Highest grade or degree completed

Marital Status: \_\_\_\_\_ Active Military: Yes \_\_\_ No \_\_\_ Household Annual Income: \_\_\_\_\_

County: \_\_\_\_\_ Current Residence: Own \_\_\_\_\_ Rent \_\_\_\_\_ Other \_\_\_\_\_

SSN: \_\_\_\_\_  
Only if purchasing credit report

### CO-APPLICANT

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Current Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
List cell phone if no home phone

Work Phone: \_\_\_\_\_ SSN: \_\_\_\_\_  
Work phone is optional Only if purchasing credit report

Relationship to Client \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Race: \_\_\_\_\_ Gender: \_\_\_\_\_

Applicant's signature \_\_\_\_\_ Date \_\_\_\_\_

Co-applicant's signature \_\_\_\_\_ Date \_\_\_\_\_

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## CREDIT REPORT AUTHORIZATION AND RELEASE

I would like to participate in Midland College BEDC counseling services to improve my credit score and/or housing situation.

I hereby authorize CoreLogic Credco, LLC ("CREDCO") to obtain my consumer report/credit information, credit risk scores and other enhancements to my consumer report (hereinafter collectively referred to as "Report") from the three national credit repositories (Equifax, Experian, Trans Union) and provide a copy of the Report to my housing/credit counseling agency, Midland College BEDC to provide housing/credit counseling services. I authorize CREDCO to provide follow-up credit reports to the Midland College BEDC for verification of credit score improvement. I understand that all of my personal information will be held in strict confidence. 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 any 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 Midland College, 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.

Any reproduction of this credit report authorization and release made by reliable means (for example, photocopy or facsimile) is considered an original.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Co-Applicant Signature

\_\_\_\_\_  
Date:

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## HOUSING COUNSELING AGENCY DISCLOSURE FORM

I understand that the Housing Education Program administered by the Midland College Business Economic Development Center (BEDC) provides confidential pre-purchase and post-purchase housing counseling after which I will receive a written Action Plan consisting of recommendations for handling my finances, possibly including referrals to other housing agencies as appropriate.

I may be referred to other housing services of the organization or another agency or agencies as appropriate that may be able to assist with particular concerns that have been identified. I understand I am not obligated to use any of the services offered to me.

A counselor may answer questions and provide information about bankruptcy, but not give legal advice. If I want legal advice, I will be referred for appropriate assistance. While an attorney can make a recommendation to file bankruptcy, it is a personal choice based on individual circumstances.

I understand that the BEDC provides information and education on numerous loan products and housing programs and I further understand that the housing counseling I receive from the BEDC in no way obligates me to choose any of these particular loan products or housing programs.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Co-Applicant Signature

\_\_\_\_\_  
Date:

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**CLIENT DISCLOSURE & AUTHORIZATION  
FOR HOMEBUYER COUNSELING**

**CLIENT DISCLOSURE & AUTHORIZATION FOR COUNSELING**

I understand that BEDC staff may discuss information about my credit history, financial situation, employment and other information with me, and with other representatives of financial institutions, or agencies. I further understand that all information about my personal circumstances will be treated as confidential and that NO information about me will be discussed with anyone not directly involved in efforts to improve my housing situation.

I hereby authorize BEDC staff to discuss any information related to my personal circumstances and to release or obtain credit, financial, employment, and other information from any entities, as BEDC staff deem necessary.

**I understand that it is my option to work with any real estate agent, lender, housing provider, or other representative(s) of my choosing. BEDC staff will work with such representative in assisting me to improve my housing situation.**

I agree to hold harmless the BEDC and its agents and/or employees from any and all claims or causes of actions arising, or which may arise, from mistakes, errors, or omissions in regards to BEDC counseling.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Co-Applicant Signature

\_\_\_\_\_  
Date:

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