

The Fairmont-Morgantown Housing Authority

HomeOwnership Center

Fairmont (304)363-0860 Morgantown (304)291-1660 Toll Free (800)637-7464

> Fax (304)366-0469 www.fmhousing.com

Thank you for your interest in The Fairmont-Morgantown Housing Authority HomeOwnership Counseling Program.

Please complete the attached profile form and: ** Mail profile form and copy or credit report or fee to P.O. Box 2738, Fairmont, WV 26555-2738

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**Hand Deliver to 103 Twelfth Street, Fairmont

Or

**Fax profile form and copy of credit report to 304.363.3400

Or

**Scan and E-mail profile form and copy of credit report to tnichols@fmhousing.com

We will review and process the information in order of receipt, and you will be contacted to set up an appointment.

Please not that this form is Not a loan application.

A copy of your credit report is necessary for housing counseling. You may obtain a copy of your credit report for free from www.annualcreditreport.com. Please keep in mind that this website does not provide information about your credit score. We can also pull a mortgage credit report which provides your score and additional details from all 3 credit bureaus. You will be charged what we have to pay to pull the credit report. Please include your fee of \$28.45 for an individual credit report of \$49.30 for a joint credit report in the form of check or money order made payment to FMHA if you would like us to pull it.

Please complete the attached monthly spending plan to the best of your ability as well.

If you have any questions, don't hesitate to contact me at 304.363.0860 ext. 127

Sincerely,

Theressa Nichols

Senior Housing Counselor/Education Coordinator The Fairmont-Morgantown Housing Authority Home Ownership Center O: 304.363.0860 ext. 127

C: 304.694.5721

F: 304.366.3400 www.fmhousing.com





The Fairmont-Morgantown Housing Authorities HomeOwnership Center

103 12th Street - P.O. Box 2738 - Fairmont, WV 26554-2738 (304) 363 - 0860 - 1800-637-7464



Personal Profile Form (This is NOT a Mortgage Application)

Note: *If you have an impairment, disability, language barrier, or otherwise require an alternative means of completing our forms or accessing information about our programs, please let us know so we can arrange alternative accommodations. For Telecommunications Relay Service (TRS) please dial 711

BORROWER			CO - BORROWER			
Name: Last	First	MI	Name: Last	First	MI	
Address			Address			
City	State	Zip Code	City	State	Zip Code	
Social Security Num	nber	Date of Birth	Social Security Nun	nber	Date of Birth	
Home Phone:			Home Phone:			
Cell Phone: ———		***************************************	Cell Phone: ———			
Work Phone: ——			Work Phone: ——			
E-mail:			E-mail:			
Employer Address			Employer Address			
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City	State	Zip Code	City	State	Zip Code	
Position/Title	Pho	ne Number	Position/Title	Ph	one Number	
Date Hired	Hours Worke	d Per Week	Date Hired	Hours Work	ked Per Week	
Hourly Rate or Sala	ary Amount		Hourly Rate or Sal	ary Amount		
If employed for LES listing employers on		t one place, continue	If employed for LES listing employers on		at one place, continue	
Borrowers Signatur	re	Date	Borrowers Signatu	re	Date	
Home Ownership		n Housing Authorities' my credit file with my e real estate.	Home Ownership		wn Housing Authorities' h my credit file with my se real estate.	

INCOME & SAVINGS	ВС	ORROV	VER	CO-E	BORR	OWER
How much do you pay in rent, NOT including utilities?	\$					
How long have you lived there?				-		
Are you currently receiving Rental Assistance?	YES		NO	YES		NO
Have you owned a home in the last 3 years?	YES	;	NO	YES		NO NO
Checking Account Balance:				YES		NO
Savings Account Balance:						
Cash or Savings at Home:			· ,			<u> </u>
Do you receive Child Support?	YES	,	NO	YES		NO
If yes, what amount?						
Do you receive SSI or SSD?	YES		NO	YES		NO
If yes, what amount?						
Any other additional monthly income not listed previously?	YES		NO	YES		NO
If yes, what is the amount?	•					
Do you own property?	YES		NO			
Are you a Veteran?	YES			YES		NO
Are you a U.S. Citizen?			NO	YES		NO
How did you hear about our services?	YES		NO	YES		NO
IABILITIES	BO	RROW	ER	CO-I	BORR	OWER
Rate your credit:	Good	Poor	None		Poor	None
Do you have any outstanding collections or judgements?	YES	1 001	NO	YES		NO
If yes, approximate amount you still owe?						
Have you filed Bankruptcy in the past 3 years?	YES		NO	YES		NO
Do you pay Monthly Child Care, Child Support, or Alimony?	YES		NO	YES		NO
If yes, how much?						
OTHER INFORMATION (optional)	ВО	RROV	VER	CO-E	BORR	OWER
Race American Indian or Alaska Native						
Asian						
Black or African American						
Hispanic or Latino						
Native Hawaiian or Other Pacific Islander						
White					-	
Other						

Personal Monthly Budget http://www.vertex42.com/ExcelTemplates/personal-monthly-budget.html

INCOME	Budget	Actual	Difference
Wages & Tips	0.00		-
Interest Income	0.00		-
Dividends	0.00		-
Gifts Received	0.00		-
Refunds/Reimbursements	0.00		-
Transfer From Savings	0.00		-
Other	0.00		-
Other	0.00		-
Total INCOME		-	

HOME EXPENSES	Budget	Actual	Difference
Mortgage/Rent	0.00		-
Home/Rental Insurance	0.00	0.00 PM P 0.00 PM 200 PM 2	-
Electricity	0.00		-
Gas/Oil	0.00		-
Water/Sewer/Trash	0.00		-
Phone	0.00		-
Cable/Satellite	0.00		-
Internet	0.00		-
Furnishings/Appliances	0.00		-
Lawn/Garden	0.00		-
Maintenance/Supplies	0.00	***************************************	-
Improvements	0.00		-
Other	0.00		-
Total HOME EXPENSES	-	-	-

Budget	Actual	Difference
0.00		-
0.00		-
0.00		-
0.00		-
0.00		-
0.00		-
0.00		-
	0.00 0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00 0.00

Total TRANSPORTATION	-		<u>-</u>
HEALTH	Budget	Actual	Difference
Health Insurance	0.00		-
Doctor/Dentist	0.00		-
Medicine/Drugs	0.00		-
Health Club Dues	0.00		-
Life Insurance	0.00		-
Veterinarian/Pet Care	0.00		-
Other	0.00		-
Total HEALTH	-		-

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CHARITY/GIFTS	Budget	Actual	Difference
Gifts Given	0.00		-
Charitable Donations	0.00		-
Religious Donations	0.00		-
Other	0.00		-
Total CHARITY/GIFTS	-	-	-

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SUBSCRIPTIONS	Budget	Actual	Difference
Newspaper	0.00		-
Magazines	0.00		-
Dues/Memberships			-
Other	0.00		-
Total SUBSCRIPTIONS	•		-

MONTHLY BUDGET SUMMARY	Budget	Actual	Difference
Total Income	0.00	0.00	0.00
Total Expenses	0.00	0.00	0.00
NET	0.00	0.00	0.00

DAILY LIVING	Budget	Actual	Difference
Groceries	0.00		-
Personal Supplies	0.00		-
Clothing	0.00		-
Cleaning	0.00		-
Education/Lessons	0.00		-
Dining/Eating Out	0.00		-
Salon/Barber	0.00		-
Pet Food	0.00		-
Tabacco/Liquor	0.00		-

Total DAILY LIVING	-	<u>.</u>	- ·
ENTERTAINMENT	Budget	Actual	Difference
Videos/DVDs	0.00		-
Music	0.00		-
Games	0.00		-
Rentals	0.00		-
Movies/Theater	0.00		-
Concerts/Plays	0.00		-
Books/Supplies	0.00		-
Hobbies	0.00		-
Film/Photos	0.00		-
Sports	0.00		-
Outdoor Recreation	0.00		-
Toys/Gadgets	0.00		-
Vacation/Travel	0.00		-
Allowance	0.00		_

Total ENTERTAINMENT	-		
SAVINGS	Budget	Actual	Difference
Emergency Fund	0.00		-
Transfer to Savings	0.00		-
Retirement (401k, IRA)	0.00		-
Investments	0.00		-
Education	0.00		-
Other	0.00		-

Budget	Actual	Difference
0.00		-
0.00		-
0.00		-
0.00		-
0.00		<u>-</u>
0.00		
0.00		-
	0.00 0.00 0.00 0.00 0.00 0.00 0.00	Budget Actual 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00

Total OBLIGATIONS	-	-	- ·
MISCELLANEOUS	Budget	Actual	Difference
Bank Fees	0.00		-
Postage	0.00		-
School Lunch	0.00		-
Work lunches	0.00		-

Total MISCELLANEOUS