

## **HBED Intake**

## A. Client Information

Last Name	First Name	Middle Initial		
Street Address		City, State & Zip		
Best Phone Number(	s) to Reach You	Email Address		
Currently Rentir	ng	How long at this address?		
Own My Home		How many in the household?		
		How many dependents?		
If mailing address is o	different than address listed abov	ve, please list here:		
Street Address		City, State, Zip		
Co-Client	t Information			
Last Name First Name		Middle Initial		
Street Address (If di	fferent from above)	City, State Zip		
Best Phone Number(	s) to Reach You	Email Address		
Currently Renting		How long at this address?		
Own My Home		How many in the household?		
		How many dependents?		
If mailing address is o	different from address listed abov	ve, please list here:		
Street Address		City. State. Zip		



2. Zemegrapine mornadion			
Client Gender: Female Male	Co-Client Gender: Female Male		
Client Date of Birth:	Co-Client Date of Birth:		
Race/ Ethnicity  African American	Race/ Ethnicity		
	African American Caucasian		
Caucasian	Caucasian Asian American/ Pacific Islander		
Asian American/ Pacific Islander	Hispanic		
Hispanic Native American	Native American		
Native American	Native American		
Marital Status	Marital Status		
Single, never married	Single, never married		
Divorced	Divorced		
Married	Married		
Separated	Separated		
Widowed	Widowed		
Employment Status	Employment Status		
Full Time	Full Time		
Part time	Part time		
Student	Student		
Highest Level of Education Completed	Highest Level of Education Completed		
Less Than 12 Years	Less Than 12 Years		
High School Diploma/ GED	High School Diploma/ GED		
Some College	Some College		
AA Degree/ Two Year	AA Degree/Two Year		
Bachelor's Degree/Four Year	Bachelor's/Four Year		
Graduate Degree	Graduate Degree		
Check All That Apply:	Check All That Apply:		
First Time Home Buyer	First Time Home Buyer		
Single, Head of Household	Single, Head of Household		
Female Head of Household	Female Head of Household		
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US Veteran Owned a home in the last 3 years	US Veteran Owned a home in the last 3 years		

B. Demographic Information



C. Income Info							
Employer:		Pay Sche	dule:				
Gross pay amount: \$		Weekly Bi	-weekly				
	-	Twice a month	Monthly				
Other income you may receive:							
2 <sup>nd</sup> Job Alimony Child Support	SSI/SSDI SNAF	P(food stamps)	Other				
Gross pay amount:\$							
Co-Client Income							
Employer:		Pay Sche	dule:				
Gross pay amount:\$		Weekly E	Bi-weekly				
		Twice a month	Monthly				
Other income you may receive:			,				
2 <sup>nd</sup> Job Alimony Child Support	SSI/SSDI SNAF	P(food stamps)	Other				
Gross pay amount:\$							
Lender & Closing Info							
Who is your lender?							
When is your closing date?		Sales Price?					
How did you learn about New Level CDC?							
Disclosure							
New Level CDC provides Housing Counseling and Hor credit & budget counseling & coaching, mortgage loa finding affordable housing. As our client, you are not offered by New Level CDC or our partners in order to	n information sessions, a obligated to receive, pu	a matching savings p rchase, or utilize any	rogram, & help				
Upon using New Level CDC home buyer education se CDC will send a statement of invoice to my lender for the final loan closing documents and is due and paya	the amount of \$225.00.	This amount will be					
Client Signature	 Date						
Client Signature	 Date						
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