

Central Jersey Housing Resource Center Program Disclosure

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Purpose of Housing Counseling.

I/We understand that the purpose of the Central Jersey Housing Resource Center (CJHRC) housing counseling program is to provide one-on-one counseling to help our housing/financial goal(s). I/We understand my counselor will need to analyze my financial and credit situation, identify those barriers preventing me/us from obtaining our housing/financial goals and help develop a plan to remove those barriers. I/We further understand that it will not be the responsibility of the counselor to resolve the problem but rather to provide guidance and education to empower me/us in correcting those issues preventing me/us from meeting our housing/financial goals.

In addition to providing comprehensive housing counseling services for homebuyers, homeowners and renters, Central Jersey Housing Resource Center. (CJHRC) offers the following services and programs:

Fair Housing. First Home Club, Legal Consultation Program, Savings Match Program and outreach for Seniors.

Administrative Agent Services for Affordable Sale, Resale or Rental Units for Towns under a Fee for Service Contract.

Client's Responsibility

I/We understand that it is our responsibility to work in conjunction with CJHRC and their staff during the counseling process and that failure to cooperate will result in the discontinuation of the counseling program.

Disclosures

I/We understand Central Jersey Housing Resource Center (CJHRC) is committed to offering clients a variety of counseling services and programs. I/We further understand that Central Jersey Housing Resource Center also maintains affiliations, funding sources, partnerships, and working relationships with other public and private community organizations which could create a conflict of interest.

Financial support for the CJHRC's Housing Counseling Program has recently or is currently being provided by the

following industry partners: Affinity Federal Credit Union , Bank of America, Capital One Foundation/Bank, Costco, Franklin Township CDBG, HUD, Somerset County Human Services, Somerset County Homelessness Trust Fund, Investors Foundation/Bank, Johnson & Johnson Somerset County Companies, M&T Foundation/Bank, Macys, Magyar Foundation/Bank, Novartis, NJHMFA Hardest Hit Funds, NJM Insurance Group, PNC Foundation/Bank, Peapack Gladstone Bank, Provident Bank Foundation, PSE&G, Roselle Savings Bank, Somerset Savings Bank, SLA, Santander Foundation/Bank, Synchrony Bank, TD Bank, Tyler Foundation, Wegmans, Wells Fargo Housing Foundation and United Way of Northern NJ,.

Permission to Collect and Share Information

As a condition to receiving CJHRC housing/counseling services, you must allow information collected by our staff to be shared between HUD, Department of Human Services, Legal Services of Northwest Jersey and other CJHRC grant funders/providers to review your electronic and/or paper records in order to establish eligibility in programs or as proof of CJHRC's services provided to you/your household.

Client Choices

I/We understand CJHRC is committed to offering clients a variety of information and there is no obligation to use products or services of CJHRC or its partners/supporters. I/We understand that I/We are free to choose a product or abstain from doing so, and that receiving housing counseling services from the agency is not contingent on the use of any product or service.

Alternative Services, Programs and Products.

CJHRC Counselors, as appropriate, refer clients to other community service organizations such as: Somerset County Office on Aging and Disability Services, Somerset County’s Office of Housing and Community Development which include housing programs, Board of Social Services in several counties, Homeownership Education, voucher programs (Section 8 and State Rental Assistance), homeless intervention and other housing assistance and agencies that may be helpful and a good resource for the client.

Clients are provided with a community resource list which outlines emergency shelter programs, financial assistance, transitional housing information, free medical assistance as well as other programs and resources offered in Somerset & Hunterdon County and the surrounding region. Additionally, we also refer clients to our lender Realtor, attorney and home inspection lists.

Household Size: The total number of persons, related or not related including children, living in your household? ____

Do you live in Somerset County? Yes _____ No _____ If not what County _____

Do you work in Somerset County? Yes _____ No _____ If no what County _____

For Statistical Purposes only-- Please indicate your racial/ethnic group below.

Hispanic Yes _____ No _____

- Asian _____ American Indian/Alaskan Native _____
- Asian & White _____ American Indian/Alaskan Native & White _____
- Black/African American _____ American Indian/Alaskan Native & Black _____
- Black/African American & White _____ Native Hawaiian/Other Pacific Islander _____
- White _____ Chose Not to Respond _____
- Other Multi Racial _____

Age: Please circle age range: 21-29 30-34 35-39 40-44 45-49 50-54 55-59 60+

Are you or the head of household disabled? Yes No

Female Head of Household: Households that consist of at least two people, if the principal provider is female?

Yes No

Household Size and Income: Circle the appropriate column for your family size and household income

1	2	3	4	5	6	7	8
0-\$22,100	0-\$25,200	0-\$28,400	0-\$31,500	0-\$34,000	0-\$36,500	0-\$39,100	0-\$41,600
\$22,101-\$36,800	\$25,201-\$42,000	\$28,401-\$47,250	\$31,501-\$52,500	\$34,001-\$56,700	\$36,501-\$60,900	\$39,101-\$65,100	\$41,601-\$69,300
\$36,801-\$58,800	\$42,001-\$67,200	\$47,251-\$75,600	\$52,501-\$84,000	\$56,701-\$90,700	\$60,901-\$97,400	\$65,101-\$104,200	\$69,301-\$110,900
Over \$58,801	Over \$67,201	Over \$75,601	Over \$84,001	Over \$90,701	Over \$97,401	Over \$104,201	Over \$110,901

This is to acknowledge that I have received, reviewed, and understand CJHRC’s Housing Counseling Program Disclosure.

Client Signature Date

Client Signature Date

Counselor (Print name & Sign)

Date