

Little Dixie Community Action Agency, Inc

Customer Intake Form

Date: _____

Early Head Start
 Head Start
 CASA
 Americorps
 Passport to the Future
 Youth Restitution

Section 8 to Homeownership
 Self-Help
 Rural Development Housing
 BancFirst
 Emergency Assistance
 Tax Preparation

RSVP
 CACFP
 PRIME
 RHED
 Small Business Loan
 SoonerRide/RTW

How did you hear about us? Friend/Relative Walk-In Newspaper TV/Radio Flyer Staff Member Other: _____

Are you related to anyone currently employed by Little Dixie? _____ If yes, who? _____

(Fill out Disclosure Form if "Yes")

Customer Name: _____ SS# _____ / _____ / _____
First MI Last Jr/Sr

DOB _____ / _____ / _____ Age: _____ Race: _____ Ethnicity: Hispanic or NonHispanic CDIB: Y or N

Gender: M or F US Citizen: Y or N Highest Level of School Completed: _____ Disabled: Y or N

Veteran: Y or N Health Insurance: Y or N Marital Status: _____ # of Dependents: _____ Email: _____

Current Address: _____ Home Phone () _____
Street/P.O. Box City State Zip

From _____ to Present Rent or Own Current Rent/Mortgage Payment \$ _____
Move in Date

Previous Address: _____ From _____ to _____ Rent/Own \$ _____
Street/P.O. Box City State Zip Payment Amt.

Income (Gross Income, Before Taxes)

Sources: Employment SS SSI VA TANF Food Stamps Child Support Other:

Monthly Amount:	\$	\$	\$	\$	\$	\$	\$	\$
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Household Information (List everyone that lives in the household, use back of sheet if more room is needed)

Name _____ DOB _____ Age _____ Relationship to Customer _____ Gender _____

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By signing below I certify that all the information contained in this document is true to the best of my knowledge. I also give this agency permission to release the information in this document. I further authorize Little Dixie to order a consumer credit report and verify other credit information.

Signature _____ Date _____

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Customer #1 Employment (2 years)

Current Employer: _____ Position: _____ From _____ to Present

Address: _____ Phone () _____
Street/P.O. Box City State Zip

Previous Employer: _____ Position: _____ From _____ to _____

Address: _____ Phone () _____
Street/P.O. Box City State Zip**Customer #2 Employment (2 years)**

Current Employer: _____ Position: _____ From _____ to Present

Address: _____ Phone () _____
Street/P.O. Box City State Zip

Previous Employer: _____ Position: _____ From _____ to _____

Address: _____ Phone () _____
Street/P.O. Box City State Zip

Landlord Information (2 year history)

Name: _____ Phone: () _____

Address: _____
Street/ P.O. Box City State Zip

Name: _____ Phone: () _____

Address: _____
Street/ P.O. Box City State Zip

Assets (savings accounts, checking accounts, stocks/bonds, life insurance, retirement accounts)

Institution _____ Acct # _____ Balance\$ _____

Institution _____ Acct # _____ Balance\$ _____

Automobiles

Year _____ Make _____ Model _____ Value\$ _____ Loan Balance\$ _____

Year _____ Make _____ Model _____ Value\$ _____ Loan Balance\$ _____

Real Estate

Address: _____ Market Value: \$ _____

Loan Balance:\$ _____ Mortgage Holder: _____ Pending Sale Rental

Credit References/Liabilities (credit cards, finance companies, bank loans, furniture/appliance loans, personnel loans)

Name: _____

Name: _____

Acct # _____

Acct # _____

Monthly Payment: _____

Monthly Payment: _____

Account Balance: _____

Account Balance: _____

HUD *REQUIRED* QUESTIONS

CURRENT HOUSING ARRANGEMENT (please circle):

Rent Homeless Homeowner with a Mortgage
Living with family member and not paying rent Homeowner with mortgage paid off

Are you a first time buyer? YES NO
(you do not currently own a home and have not owned a home in the past three years?)

Household Type? (please select the most accurate)

1. Female headed single parent household
2. Male headed single parent household
3. Single Adult
4. Two or more unrelated adults
5. Married with children
6. Married without children

Are you a migrant Farm Worker? YES NO

Are you a Colonias Resident*? YES NO

(Applies to California, Arizona, New Mexico, and Texas only)

* The US Department of Housing and Urban Development (HUD) defines a *Colonia* as an unincorporated community located within 150 miles of the US-Mexico border, with a population of less than 10,000 that is low and very low income, and which lacks safe, sanitary and sound housing, as well as services such as potable water, adequate sewage systems, drainage, streets and utilities.

Do you use a Section 8 Voucher to pay Rent? YES NO

What is the primary language spoken in your home? _____

Have you Received a HUD issued HECM Certificate? YES NO

Are you a victim of Predatory Lending Practices? YES NO

ADDITIONAL INCOME INFORMTAION:

	<u>Applicant</u>	<u>Co-Applicant</u>
Can you document your child support/alimony income?	Yes No	Yes No
If your child or family member receives SSI, how many more years will the payments continue?	_____	_____
If you receive disability income, is it for a permanent disability?	Yes No	Yes No

ADDITIONAL LIABILITY/DEBT INFORMATION:

	<u>Applicant</u>	<u>Co-Applicant</u>
Have your payments been made on time?	Yes No	Yes No
Have you ever filed bankruptcy? If yes, when ? _____ Chapter 7 or Chapter 13	Yes No	Yes No

Additional Information:

Do you have a contract on a house at this time? Yes No

Are you currently working with a real-estate agent? Yes No
If yes, who? _____

Little Dixie Community Action Agency, Inc.

“The following information is requested by the Federal Government for certain types of loans and grants, in order to monitor compliance with civil rights laws. You are not required to furnish this information, but are encouraged to do so. The law requires that a program recipient may neither discriminate on the basis of this information nor on whether you choose to furnish it. However, if you choose not to furnish it, under federal regulations, this program representative is required to note race/ethnicity on the basis of visual observance or surname.”

I do not wish to furnish this information.

Ethnicity:

Hispanic or Latino

Not Hispanic or Latino

Race: (Mark one or more)

American Indian/Alaska Native

Asian

Black or African American

Native Hawaiian or other Pacific Islander

White

Gender:

Male

Female