



Federal Privacy Act Notice

Purpose/Propósito: In signing this consent form, you are authorizing HUD, Chicanos Por la Causa, Inc. and Housing Assistance to obtain your family's household income information. HUD, City of North Las Vegas, and CPLC Nevada, Inc. requests this information to determine a clients housing assistance/eligibility, if applicable. *Al firmar este formulario de consentimiento, está autorizando al departamento de HUD, la Ciudad de North Las Vëas, CPLC Nevada, Inc y Housing Assistance para obtener informaci3n de los ingresos de su familia. HUD la Ciudad de North Las Vëas, CPLC Nevada, Inc y Housing Assistance ocupa esta informaci3n para determinar elegibilidad y asistencia necesaria.*

Uses of Information to be Obtained / Uso de Informacion Obtenida: HUD uses your family income and other information to assist in managing and monitoring HUD-assisted housing programs, to protect the Government's financial interest, and to verify the accuracy of the information you provide. This information may be released to appropriate Federal, State, and local agencies, when relevant, and to civil, criminal, or regulatory investigators and prosecutors. However, the information will not be otherwise disclosed or released outside of HUD, except as permitted or required by law. *La informaci3n colectada ayuda el departamento de HUD tambi3n usa el programa de vivienda asistida por HUD administrar el proceso de los aplicantes, proteger los intereses financieros del gobierno, y para verificar la exactitud de la informaci3n que usted proporciona. Esta informaci3n puede ser divulgada a agencias federales, estatales y locales elegibles, cuando sea relevante, ya investigadores civiles, criminales o fiscales. Sin embargo, la informaci3n no ser3 divulgada o lanzada fuera del Departamento de HUD, excepto como permitido • requerido por la ley.*

HUD is required to protect the income information it obtains in accordance with the Privacy Act of 1974, 5 U.S.C. 552a. HUD may disclose information (other than tax return information) for certain routine uses, such as to other government agencies, to Federal agencies for the purpose of determining housing assistance. Housing Assistance and CPLC Nevada, Inc. is also required to protect the income information it obtains in accordance with any applicable privacy law. However, the information will not be otherwise disclosed or released outside of HUD, except as permitted or required by law. *HUD es obligado proteger su informaci3n financiera de acuerdo con la Ley de Privacidad de 1974, 5 U.S.C. 552a. HUD puede revelar su asistencia de vivienda a cualquier otra agencias gubernamentales. Housing Assistance y Chicanos Por la Causa, Inc. Tambi3n es obligado proteger la privacidad de su informaci3n personal de acuerdo con la ley de privacidad aplicable. Sin embargo, la informaci3n no ser3 divulgada o lanzada fuera de HUD, excepto como permitido o requerido por la ley.*

Privacy Act Notice / Aviso de la Ley de Privacidad: The Following laws authorize the collection of said information by HUD. Authority: The Department of Housing and Urban Development (HUD) is authorized to collect income information by the U.S. Housing Act of 1937 (42 U.S.C. 1437 et. seq.), Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d), and by the Fair Housing Act (42 U.S.C. 3601-19). The Housing and Community Development Act of 1987 (42 U.S.C. 3543) requires applicants and participants to submit the Social Security Number of each household member who is six years old or older. *Las siguientes leyes autorizan la recopilaci3n de dicha informaci3n por parte de HUD. El Departamento de Vivienda y Desarrollo Urbano (HUD) est3 autorizado a recolectar informaci3n sobre sus ingresos atraves de la Ley de Vivienda de 1937 (42 USC 1437 y otros), T3tulo VI de la Ley de Derechos Civiles de 1964 (42 USC, 2000d) y Ley de Equidad de Vivienda (42 USC 3601-19). La Ley de Vivienda y Desarrollo Comunitario de 1987 (42 USC 3543) requiere que los solicitantes y los participantes presenten el N3mero de Seguro Social de cada miembro del hogar que tenga seis a3os de edad o m3s.*

Penalties / Penalidades: You must provide all of the information requested by the Housing Assistance Corporation, CPLC Nevada,, including all Social Security Numbers you, and all other household members age six years and older, have and use. Failure to provide any of the requested information may result in a delay or rejection of your eligibility approval. *Usted debe de proporcionar toda la informaci3n solicitada por la agencia de consejer3a de vivienda aprobada por HUD, incluyendo todos los n3meros de Seguro Social, y todos los dem3s miembros del hogar que tienen seis a3os de edad y mayores, tienen y usan. La falta de proporcionar cualquiera de la informaci3n solicitada puede resultar en un retraso o rechazo de su aprobaci3n de elegibilidad.*

_____ Check here to opt-out of receiving follow-up contact related to program evaluation. *Para cancelar o no recibir contacto sobre la evaluaci3n del program, marce aqui.*

I acknowledge I have read and understand the Federal Privacy Act Notice / Reconozco que he leído y entiendo la Notificaci3n de la Ley Federal de Privacidad:

APPLICANT SIGNATURE / FIRMA

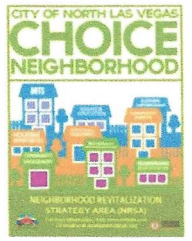
Date/Fecha

CO-APPLICANT SIGNATURE/ FIRMA

Date/Fecha



CHOICE NEIGHBORHOOD NRSA INTAKE FORM



DATE: _____ Please print CLEARLY...

Please provide information about your household for program reporting purposes. Thank you.

1. First Name: _____ MI: _____ Last Name: _____ BirthDate: _____ Age: _____
(Primary Applicant)

The following applies to me: Service Member/Military Veteran Disabled Senior LGBTQ

Ethnicity: African American Hispanic White Asian Native American Other: _____

Level of Education: Junior High School High School/GED College Degree Graduate School

2. First Name: _____ MI: _____ Last Name: _____ BirthDate: _____ Age: _____
(Co-Applicant)

The following applies to me: Service Member/Military Veteran Disabled Senior LGBTQ

Ethnicity: African American Hispanic White Asian Native American Other: _____

Level of Education: Junior High School High School/GED College Degree Graduate School

3. Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell: _____ Email: _____

Please check all that apply:

4. I presently live in rural area: Yes No

5. Total No. of household members : _____

6. I would like information about credit counseling: Yes No

7. I checked my credit 3 6 12 months ago. My/Our score(s) was/were _____ & _____ Don't know!

I am having difficulty paying my mortgage I am _____ months behind on my mortgage

I would like to inquire about mortgage default assistance

8. Marital Status: Single Married Divorced Separated Widowed

9. 1st Applicant/Gender: Male Female 2nd Applicant/Gender: Male Female Female or Male head of household?

10. Estimated Monthly Gross Income (Before taxes): \$ _____ + \$ _____ = \$ _____
(1ST APPLICANT) (2ND APPLICANT)

11. Mortgage Payment: \$ _____ Current Interest Rate: _____ I would like Refinance Information: Yes No

12. Referral Source if applicable:(How did you hear about the NRSA Program): _____

Signature-Primary Applicant

Signature- Co-Applicant

*The following form is a HUD Program Requirement. Please fill as much as possible & sign.
CPLC Nevada & Housing Assistance Corp follows strict privacy policies and does not share your personal file information with any third party not participating in the delivery, funding, and reporting process of this grant.*