

Northeast Michigan Affordable Housing Inc.
Authorization for Release of Information,
Counseling Agreement, And Privacy Act Notice
Issued under P.A. 346 of 1966, as amended, and Section 8 of the U.S. Housing
Act of 1937. Failure to comply will result in denial of benefits.



Service Type: <input type="checkbox"/> Homeownership Counseling	<input type="checkbox"/> LINKS Foreclosure Counseling
<input type="checkbox"/> National Foreclosure Mitigation Counseling	<input type="checkbox"/> USDA Well Water Program
<input type="checkbox"/> Property Improvement Program	<input type="checkbox"/> USDA Rural Housing Program

The undersigned authorize the Michigan State Housing Development Authority (MSHDA), Northeast Michigan Affordable Housing Inc. (NEMAH) and/or its contracted agent to contact any agencies, offices, groups, organizations, mortgage lenders, mortgage servicers, banks, credit unions, or employers to obtain, and agencies to release, information that is pertinent to eligibility, level of benefits, or continued participation in the CDBG, LINKS, NFMC, HOME and/or MSHDA Housing Resource Fund (HRF) Programs, including authorization to obtain consumer credit reports.

This includes, but is not limited to, the Social Security Administration (SSA), Immigration and Naturalization Service (INS), United States Department of Agriculture (USDA) – Rural Housing Service (RHS) or Rural Development (RD), and the State of Michigan Department of Human Services (DHS) Medicaid Program and Food Assistance Program. MSHDA and NEMAH may use this Authorization, and the information obtained with it, to administer and enforce program rules and policies.

The undersigned certify that the information given to MSHDA and NEMAH on household members, income, net family assets, allowances, debts, and deductions is accurate.

I/We understand that false statements or information are punishable by imprisonment for up to 10 years or by fine of up to \$5,000 and grounds for termination of housing assistance under State and Federal Law.

In signing this counseling agreement and release, I/We am/are agreeing to actively participate in the Homeownership and/or Foreclosure Counseling Program(s) being offered by NEMAH in order to receive counseling services. Participation in these programs is voluntary, and the Foreclosure Counseling Program requires me to establish the reason for my delinquency and to develop an Action Plan, in cooperation with the Counselor.

I/We acknowledge the following:

1. I/We may be referred to other housing services of the organization or another agency as appropriate, that may be able to assist with particular concerns that have been identified. I/We understand that I/we am/are not obligated to use any of the services offered to me/us.
2. I/We understand that NEMAH receives funds through MSHDA, HUD, and the National Foreclosure Mitigation Counseling (NFMC) Programs and as such, is required to share some of my/our personal information with program administrators or their agents for purposes of program monitoring, compliance and evaluation.
3. I/We understand that a counselor may answer questions and provide information, but cannot give legal advice. If I/We want legal advice, I/We will be referred to an attorney for appropriate assistance.
4. I/We understand that NEMAH provides both pre- and post-purchase counseling services and I/We will receive a written Action Plan consisting of recommendations for handling my/our finances, possibly including referrals to other housing agencies or organizations as appropriate.
5. I/We understand NEMAH provides information and education on numerous housing programs and loan products and I/We further understand that the housing counseling I/We receive from NEMAH in no way obligates me/us to choose any of these particular housing programs or loan products.
6. I/We give permission as a participant in either the MSHDA Foreclosure Prevention Counseling Program or the National Foreclosure Mitigation Counseling Program to NEMAH counselors and program administrators to pull my/our credit report up to two (2) additional times between now and June 30, 2010, and to give authorization to NEMAH counselors and program administrators to follow-up with me/us between now and June 30, 2010, for the purpose of program evaluation.

I/We authorize Northeast Michigan Affordable Housing Inc. (NEMAH), [hereinafter referred to as the Requester(s)] to discuss my/our loan account, being account number _____ with the named lender: _____ and to obtain information concerning my/our Account.

I/We authorize NEMAH to request and receive the EIN and/or MIN number on my/our loan. Further I/We specifically direct you to provide _____ /NEMAH with any and all information requested.

For this authorization and for good and other valuable consideration, receipt of which is hereby acknowledged, I/we do hereby indemnify and hold harmless my/our above named lender, its successors and/or assigns from all actions and causes of actions, suits, claims or demands, which I or my heirs, successors or assigns have, had, or may have resulting from discussing my/our Account and/or providing any information concerning my/our Account with or to the Requester or a person claiming to be the Requester.

CONSENT: I/We hereby allow MSHDA, NEMAH, its agents, employees, or its affiliates to request and obtain income and asset information, mortgage, credit bureau, and personal information pertinent to MSHDA's Homeownership Counseling Program, MSHDA's Foreclosure Prevention Program, and The National Foreclosure Mitigation Counseling Program. I/We allow contact to be made on my/our behalf with representatives from mortgage, attorney, collection, and credit bureau companies.

I/We understand and authorize NEMAH to verify information contained in this application and in other documents required in connection with this request.

I/We authorize you (the recipient of this authorization) to provide to NEMAH for verification purposes the following applicable information: past and present employment or income records; bank account, stock holdings and other asset balances; past and present landlord/mortgage/land contract references; other consumer credit references; and any other information necessary to process my/our application.

I/We authorize the release of information from my application file to my/our lender, real estate agent, contractor or other party as NEMAH deems necessary in this request for financial assistance. Additionally, I/we authorize NEMAH to verify all credit history and information and authorize the order of a credit report on all applicants listed in this application.

I/We understand that under the Right to Financial Privacy Act of 1978, 12 U.S.C. 3401, et seq., NEMAH is authorized to access my/our financial records held by financial institutions in connection with the consideration or administration of assistance to me/us. I/We also understand that financial records involving my/our loan and loan application will be available to NEMAH without further notice or authorization, but will not be disclosed or released by NEMAH to another government agency or department or used for another purpose with out my/our consent except as required or permitted by law.

I/We understand this consent is subject to revocation at any time except to the extent that NEMAH has already taken action in reliance on it. I/We understand this consent will terminate 24 months from "Signature Date" (below):

[] Date: _____ [] Event or Condition: _____

Client's Printed Name / Last 4 Digits of SSN

Client's Printed Name / Last 4 Digits of SSN

Applicants Signature Date

Applicants Signature Date

Counselor's Printed Name

Counselor's Signature

Date Signed

Northeast Michigan Affordable Housing Inc.
Name of Counseling Agency

123 N Second Ave Ste 4 Alpena, MI 49707
City – Agency Location

1230
Agency Number