HOUSING OPTIONS & PLANNING ENTERPRISES, INC. CUSTOMER RIGHTS AND RESPONSIBILITIES

As a H.O.P.E client, you have the right to expect:

- Foreclosure Assistance, Consulting, and Loss Mitigation Provided at No Charge Because Housing Options and Planning Enterprises, Inc. Home Retention Solutions program, is supported by funding from the National Foreclosure Mitigation Counseling Program administered by NeighborWorks[®] America, as well as the State of Maryland, therefore H.O.P.E. services are provided at no charge to you. Fees may apply for other training programs, special services (such as Homebuyer Education, credit counseling, etc.), materials, and publications.
- 2. Confidentiality of Information Provided All H.O.P.E homeownership representatives agree to abide by National Industry Standards for Homeownership Education and Counseling and Foreclosure Intervention Specialty Code of Ethics and Conduct. Information you provide will be held in strictest confidence and will not be released to any parties outside of the Housing Options and Planning Enterprises, Inc., HUD or NFMC, also Information on you will not be sold or provided to other organizations. Specific information on you and the nature of your engagement with H.O.P.E will not be released without your consent. No information you provide will be used to the commercial advantage of any H.O.P.E. representative or to the advantage of a third party. Exceptions:
 - Information about H.O.P.E service delivery is reported in aggregate to HUD and NeighborWorks[®] America. Specific information about you will not be released without your consent.
 - H.O.P.E. will collect and report in aggregate to HUD and the State of Maryland on you such as demographic statistics; home information; credit score; the general nature of your engagement with H.O.P.E.; and impact statistics such as the counseling outcome.
 - If you were referred to H.O.P.E., H.O.P.E. will notify the referrer that you have sought assistance. H.O.P.E., however, will not disclose in detail the nature of the assistance you are requesting.
- Unbiased Recommendations H.O.P.E. representatives will not knowingly recommend the purchase of goods or services from any individual or firm with which any H.O.P.E. representative has a financial, familial or personal interest.
- 4. Assistance, Guidance, Recommendations and Counseling The Home Retention program is a counseling assistance and loss mitigation program. H.O.P.E. will work with you on your specific issues to help you try and keep your home. It is your responsibility to accept and implement recommendations. Any recommendations by H.O.P.E. representative does not guarantee you in keeping your home. H.O.P.E. will negotiate on your behalf; but not guarantee a positive outcome

As a H.O.P.E. client, you are responsible for:

- Participation in a Surveys or Interview
 Because this program cares about the quality of services provided, and because it is primarily funded with public support, H.O.P.E. undertakes a number of initiatives to ascertain the quality and impact of services provided to you. Your candid feedback is critical to the long-term success of this program.
- Accepting Responsibility and Waiving all Claims In recognition that you are ultimately responsible for your home and that all decisions pertaining to your home purchase, loss mitigation or financial capabilities are solely your responsibility, you hereby waive any claims of damages against H.O.P.E. and the Home Retention, Pre-Purchase, and Financial Capability Program.

I have read and understand the above stated terms and conditions.

Client Print Name

Signature

Date

Client Print Name

Housing Options & Planning Enterprises, Inc. 6188 Oxon Hill Road Oxon Hill, MD. 301-567-3330 240-296-5013 hope@hopefinancial.org

Certificate Request Form

This form must be filled out before your certificate is released Complete all information requested to avoid any delays.

Date Course Completed: _____

Participant(s) Name: _____

		TO BE COMPLE	TED	
Bank/Mortgage Name: _		Loan Officer's Name:		
City:	Phone:	Fax:	E-Mail:	
Purchase Price:	Loan Amoun	t:	_ Appraised Value: _	
New or as-is / existing H	lome:	Back to	Work? Yes	No
Rehab Program/Cost:	Interest Rat	e:% Loan	Term:	
Closing Costs:	Monthly	Payment (PI):	Monthly Taxes:	
Hazard Insurance:	Monthly MIP:			
Down Payment;	Borrower: \$	Seller Paid: \$		
CDA: A	Amt: \$ Interest	Rate:% Month	ıly PMT: \$	Term:
Closing Date:				
New Property Address:		City:	State:	Zip:
Are you a BUY Suitland	participant? Yes N	No		

I (We) hereby authorize Housing Options & Planning Enterprises, Inc. to obtain and or release all information that includes, but not limited to HUD-1 closing statement, verify mortgage loans, down payment information if necessary, and make any other inquiries pertaining to the counseling services they are providing to me at their request.

My signature (original or facsimile) authorizes my lender to provide to H.O.P.E all the above information if not provided above.

Participant Signature

Participant Signature