

# Application for Approval as a Housing Counseling Agency

Housing Counseling Program

U.S. Department of Housing and Urban Development  
Office of Housing  
Federal Housing Commissioner

OMB Approval No. 2502-XXXX  
(Exp.xx/xx/xxxx)

## See last page for Public Burden Statements

This form is to be used by all organizations requesting HUD approval as a housing counseling agency, Intermediary, or Multi-state Organization. Send a complete application with original signature and all supporting documentation and narrative statements to the appropriate HUD Office located at the following website: Before applying, HUD recommends you review HUD Handbook 7610.1 and 24 CFR Part 214 .

### SECTION A - Complete and submit this section.

Official Name of the Organization:	Address of the Main Office (list branch & affiliate offices on a separate sheet of paper): (Street Address)
Website (if applicable):	(City)
	(State)(Zip)
Acronym; aka, or dba, if applicable:	Executive Director's Name:
Counseling Program Administrator's Name & Title:	Name, Title, Date & Signature of Authorized Person:
Agency Telephone Number:	Date Counseling Services Started:
Agency Email Address:	Agency's Federal Tax Number (TIN):
Name of Person to be contacted on matters involving this application:	Phone number, facsimile and e-mail address of person to be contacted on matters involving this application:

#### Type of organization. Please check one box.

**National Intermediary Organization** - Has branches or affiliates in 9 or more states and covers more than one regional area. National intermediary organizations provide training, technical assistance, oversight, and pass-through funding to affiliated agencies or branches.

**Regional Intermediary Organization** – Has branches or affiliates in eight or fewer states and serves a distinct regional area such as the Southwest or the Northeast. Regional intermediary organizations provide training, technical assistance, oversight, and pass-through funding to affiliated agencies or branches.

**Multi-state Organization (MSO)** – Provides housing counseling and education services through a main office and branches in two or more states. All branches operate and are identified under main office tax ID number.

**Local Housing Counseling Agency (LHCA)** – Directly provides housing counseling and education services through one location or a main office with one or more branch offices, in no more than two contiguous states. *An exception can be made for a local housing counseling agency that serves a single metropolitan area covering more than 2 contiguous states .*

**State Housing Finance Agencies (SHFAs)** – SHFAs are not required to submit an application for HUD approval. However, to participate in HUD's Housing Counseling Program, SHFAs must either submit a housing counseling grant application through the HUD Super Notice of Funding Availability (NOFA) or submit a request and provide HUD with a list of affiliates, if applicable, and assure that they meet all program requirements. SHFAs submitting a request must complete: Section A; Section B Part 1, item 7; and Section C, *ASSURANCES AND CERTIFICATIONS*. SHFAs must also submit a copy of the relevant statutory authority to operate as a SHFA and provide housing counseling services throughout the entire state.

List all States in which your organization provides counseling services:

**Type(s) of Support Provided:**

Is your organization Faith Based?  Yes  No

Does your organization provide services to migrant farm workers?  Yes  No

Does your organization provide services in Colonias?  Yes  No

*(Colonias are rural economically distressed communities located within 150 miles of the US-Mexican border that lack basic infrastructure; running water, electricity, paved roads, etc.)*

Is your organization designated as a legal services agency?  Yes  No

**Type(s) of Housing Counseling Services to be provided.** Check all services for which the agency is seeking HUD approval. As a condition of approval, HUD may require training or an exam, for example, training on FHA programs and products, prior to approving an agency to provide a specific service.

**A. Pre-Purchase/Homebuying:**

- PC – Pre-purchase One-On-One Counseling
- FHE – Fair Housing Pre-purchase Education Workshops \*
- PRL – Predatory Lending Education Workshops \*
- PPE – Pre-purchase Homebuyer Education Workshops \*

**B. Resolving or Preventing Mortgage Delinquency or Default:**

- DFC – Mortgage Delinquency & Default Resolution One-On-One Counseling  
(This includes FHA’s loss mitigation counseling)
- DFE – Resolving/Preventing Mortgage Delinquency Workshops \*

**C. Non-Delinquency Post-Purchase:**

- FBC – Financial Management/Budget One-On-One Counseling for Homeowners
- HIR – Home Improvement & Rehabilitation One-On-One Counseling
- RMC – Reverse Mortgage One-On-One Counseling
- NDW – Non-delinquency Post Purchase Workshops for Homeowners

**D. Locating, Securing, or Maintaining Residence in Rental Housing:**

- FHC – Fair Housing One-On-One Counseling
- RC – Rental One-On-One Counseling
- REC – Rental education workshops \*

**E. Shelter or Services for the Homeless:**

- HOM- Services for Homeless One-On-One Counseling

**Other (please list):** \_\_\_\_\_

\* An applicant that offers group, education sessions must also offer counseling on the same topic.

**SECTION B - SUBMIT THE FOLLOWING DOCUMENTATION AND NARRATIVES**

**PART 1 - APPLICANT INFORMATION**

LHCAs must respond to items 1 - 6 in this part, and item 7 if applicable.

Intermediaries and multi-state organizations must respond to items 1 – 7 in this part for every HUD program affiliate or branch included in your application, including the main office if housing counseling services are directly provided there.

Multi-state Organizations and Intermediaries must also respond to items 1 – 5 on behalf of the main office. Item 4 B is not applicable if direct services are not provided at the main office. Intermediaries and must also respond to item 8.

1. Non-profit Status: Send a legible copy of the document that supports the agency's claim to be a non-profit organization (i.e. 501 [c] letter issued by IRS). The attachment must include the official name, address, and telephone number of the legal authority that granted the non-profit status. The applicant must assure HUD that its branches or affiliates must also be nonprofit entities.

or

Local Government: Submit a copy of the document that authorizes you to provide housing counseling if you are a unit of local, county, or State government.

2. Charter: Submit a copy of the recorded document (i.e., Charter, Articles of Incorporation, By-laws, governing body meeting minutes, etc.) that specifically authorizes your organization to provide housing counseling.
3. Community Base: Indicate when the agency began providing housing counseling services. Describe the agency's achievements in providing housing counseling for the past 12 months for the communities in which you seek approval to operate. This statement should include specific activities relating to the services described in your housing counseling plan. Quantify the number of households to whom the agency provided counseling and education services during the past 12 month period by completing form HUD-9902.
4. Counseling Resources: Describe your agency's resources for the topics A-D listed below.

A. Staff:

- 1) List all staff involved in the housing counseling program including all board members, supervisors, housing counselors, and clerical support staff. State position title, duties, and whether the position is full-time or part-time, is paid or volunteer capacity. Include hours worked per week for all positions provided and length of employment.
- 2) Submit a resume/dossier for each staff person that will be involved in delivering any or all parts of housing counseling activities, including supervisory staff and housing counselors. Do not include clerical support staff.
- 3) Indicate the extent of each counselor's knowledge of HUD housing programs, and other programs available in the target community. Cite training received including date and source of training. Submit copies of training certificates received relating to the above programs.
- 4) Identify counselors fluent in other languages. List the non-English languages available for each office.
- 5) Identify any other jobs or activities apart from the Housing Counseling agency, an employee, volunteer or board member of the agency performs that could result in a conflict of interest as identified in Chapter 6 of HUD Handbook 7610.1.

B. Facilities: For each facility where direct counseling services will be provided:

- 1) Indicate whether the agency owns or rents the facility. If rented, include a copy of your lease. Attach a photograph copy of the facilities that include signage.
- 2) Indicate the agency's operating hours and extended hours when necessary.

- 3) Describe accessibility features for disabled and elderly clients that may have special needs or how your organization makes alternate accommodations to serve disabled and elderly clients that have special needs.
- 4) Indicate what public transportation, if any, is close to the facility (example: within 15 minutes walking).
- 5) Describe what space is available for one-on-one counseling and group education.
- 6) Describe how client files are kept confidential.

C. Funding:

- 1) List the sources and amounts of funds specifically for housing counseling that are currently available to you. Please submit copies of any written funding commitments.
- 2) Submit a copy of your current housing counseling budget.
- 3) List the amount of income received during the last 12 months from housing counseling fees, if applicable.
- 4) Submit a copy of the agency's most recent fiscal year-end financial statement prepared in accordance with generally accepted accounting principles and reporting practices and must include an auditor's review report, a treasurer's report and any supplemental schedules.

D. Community Resources. Submit a list of local, State, Federal, public and private agencies with whom your agency and branches or affiliates have established working relationships for the provision of various kinds of assistance to your clients. Include a brief description of the type(s) of community resources or services each agency listed will provide for your clients. Community resources include HUD-approved counseling agencies with which the applicant and its branches or affiliates will work cooperatively.

5. Other Agency Housing Activities. Describe any other housing programs or activities the applicant agency and branches or affiliates offer. Examples include administering down payment assistance programs, developing housing projects, managing apartment buildings, rehabilitating and reselling HUD homes, and selling real estate. Identify those programs to which housing counseling clients may be referred. Provide a sample Disclosure Statement that the agency will provide to a client and each participant in group education that explicitly describes the various types of services provided by the agency and any financial relationships between this agency and any other industry partners. The disclosure must clearly state that the client is not obligated to receive any other services offered by the organization or its exclusive partners. Furthermore, the agency must also provide information on alternative services, programs, and products.

6. Client Management System. Identify the automated housing counseling client management system used by the agency for the collection of client-level information including, but not limited to, financial and demographic data, counseling services provided, and outcomes data. Agencies must utilize a Client Management System that satisfies HUD's requirements and interfaces with HUD's databases.—

7. Affiliates and Branches. Provide the following information for each affiliate and branch in your proposed HUD housing counseling program:

- 1) Official name
- 2) Physical address including ZIP Code
- 3) Mailing address if different from address on line 2 above
- 4) Telephone Number(s) including toll-free if available

- 5) Name, title, and telephone number of the person in charge of the housing counseling program at each location
8. Intermediary Activities. For intermediaries, describe and date the organization's experience in operating as a housing counseling intermediary. Describe and quantify the training, technical assistance, oversight, and pass-through funding provided to branches & affiliates.

## **PART 2 - HOUSING COUNSELING WORK PLAN**

Submit a detailed and concise housing counseling plan based on the information requested below. The plan should explain the needs and housing problems of the target population and how your agency will address those needs and problems with your available resources. Intermediaries and Multi-state Organizations must submit a workplan for each proposed HUD program affiliate or branch office.

HUD considers an acceptable housing counseling plan to be a reasonable interlocking of the needs and housing problems of the target areas with the resources available to the applicant and its branches or affiliates to address those needs and problems successfully on behalf of clients. HUD will not approve a well-meaning but ill-conceived plan that lacks the necessary resources.

### 1. Target Area(s):

- A. Submit a concise but detailed description of the target area you propose to provide the housing counseling services identified in your work plan and selected in Part A of the application form. The description must include, but is not limited to, such items as size of population, socio-economic factors, racial and ethnic makeup of the population, and age and condition of housing.
  - B. Provide a brief statement as to your reasons for selecting the target area and how your organization can serve the community.
  - C. If other HUD approved housing counseling agencies serve the same area, provide justification for the overlapping of services.
  - D. Clearly define the geographic boundaries of your proposed service area(s). Include only those areas from which your agency received "clients" during the 12-month period immediately preceding the date of your application.
  - E. On a map, indicate the location of your counseling facility(ies). On the same map, outline and identify the geographic areas you now serve as you indicated in "D" above.
  - F. On the same map, indicate the locations and the names of other HUD approved housing counseling agencies within the same areas you serve.
2. Housing Needs and Problems: Submit a descriptive statement of the housing needs and problems of the target population. The statement must cite the specific sources from which you obtained your data. Include special needs and problems, such as those related to low income or poverty, homelessness, language barrier, ethnic, minority, and racial factors.

3. Description of Services: Describe in detail the housing counseling activities that you will be providing as a HUD approved housing counseling agency as indicated in Part A of this form. The Plan should be specific as to these activities and how you will deliver each type of service. Your plan must reflect an understanding of HUD's definition of each housing counseling service as set forth in HUD Handbook 7610.1.
4. Outcomes: Describe the anticipated results (outcomes) to be achieved within the initial period of approval.
5. Fee Schedule: If you plan to charge for counseling, submit a schedule of charges to ensure that you are in compliance with the requirements of 24 CFR Part 214.
6. Non-English Speaking or Limited English Proficiency (LEP) Clients: Describe how you plan to serve non-English speaking or LEP clients.

### **SECTION C - ASSURANCES AND CERTIFICATIONS**

By signing below, the applicant assures and certifies the following:

1. Assurances: I assure that this agency, and HUD program branches and affiliates, if applicable, will:
  - A. Administer the housing counseling in accordance with Title VI of the Civil Rights Act of 1964, Title VIII of the Civil Rights Act of 1968, Executive Order 11063, Section 504 of the Rehabilitation Act of 1973, and the Age Discrimination Act of 1975.
  - B. Provide housing counseling services without sub-agreements with other agencies for the delivery of all or any part of the services in our proposed housing counseling work plan as approved by HUD.
  - C. Represent our clients without any conflict of interest by our agency, paid and volunteer staff, or board members which might compromise our ability to represent fully in the best interests of the client in accordance with HUD Handbook 7610.1.
  - D. Meet all local, State, and Federal requirements necessary to provide our agency's housing counseling services, including the management and liquidation services if your agency provides such services.
  - E. Comply with the fee guidelines set forth in Handbook 7610.1, if we plan to charge counseling fees.
  - F. Accept all clients that our agency has the capacity to serve.
2. Certifications: I certify that this agency, and HUD program branches and affiliates, if applicable:
  - A. Are acting on our own behalf and are not under the influence, control, or direction of any outside party such as a landowner, real estate broker, contractor, builder, lender, or consultant seeking to derive a profit or gain from our housing counseling program clients.

- B. Meet the applicable accessibility requirements of Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), 24 CFR parts 8 and 9, and the Americans with Disabilities Act (42 U.S.C. 12101 *et seq*). Our facility(ies) provide accessibility features for persons with disabilities and elderly persons, or we will arrange to meet with such persons at an alternative accessible location.
- C. No employee, board member, or partner has been suspended, debarred, or otherwise restricted under the Department's or any other federal regulations (see 24 CFR Part 214).
- D. Have not been indicted for, or convicted of, a criminal offense that reflects upon the responsibility, integrity, or ability of the agency to participate in housing counseling activities. These offenses include criminal offenses that can be prosecuted at a local state, or federal level.
- E. Are not subject to unresolved findings as a result of HUD or other government audit or investigations (see 24 CFR Part 214)..
- F. Meet all HUD Housing Counseling program approval requirements outlined in HUD Handbook 7610.1 and 24 CFR Part 24.
- G. I further certify that the information submitted in response to this ***Application For Approval As A Housing Counseling Agency*** is accurate.

Name and Title of Authorized Agency Representative:

Original Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Agency Name: \_\_\_\_\_

Note: If an application package does not meet all Program requirements, HUD will provide the agency with the reasons for the denial in writing. Within 30 calendar days of the written notice of denial, the agency may submit a revised application, or appeal HUD's decision in writing to HUD, as provided in 24 CFR § 214.205. If an agency decides to submit a revised application, the agency may consult HUD to determine the specific actions needed to resolve the deficiencies.

HUD may change a HUD-approved or participating agency's status to inactive, in lieu of termination under certain circumstances that may temporarily impair an agency from complying with its housing counseling plan. Once approved, an agency may submit to HUD a request to be placed on inactive status.

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**WARNING: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18U.S.C. 1001, 1010, 1012;31 U.S.C. 3729, 3802)**

**Public reporting burden** for this collection of information is estimated to average 8 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not conduct or sponsor, and a person is not required to respond to, a collection information unless that collection displays a valid OMB control number.

This information is collected in connection with HUD's Housing Counseling Program, and will be used by HUD to determine that the grant applicant meets the requirements of the Notice of Funding Availability (NOFA) and to assign points for awarding grant funds on a competitive and equitable basis. The information is required to obtain funding under Section 106 of the Housing and Community Development Act of 1974. The information is considered sensitive and is protected by the Privacy Act which requires the records to be maintained with appropriate administrative, technical and physical safeguards to ensure their security and confidentiality.

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