



County of Greenville

"... At Your Service"

Human Relations Commission

CLIENT COUNSELING AGREEMENT

- I do NOT consent to the "Client Counseling Agreement".
- I DO consent to participate in counseling sessions to help improve my housing situation. I understand that staff counselors may discuss information on my credit history, financial situation, employment, or related family objectives. I understand that it may be necessary for the counselor to discuss this information with representatives of other firms or agencies as is necessary to seek a solution to my objective(s). I also understand that these procedures are necessary in assisting me with my housing objective. I understand that information about my personal circumstances will be treated as completely confidential and that NO INFORMATION will be divulged to any party who is not directly involved in the situation. I authorize the Human Relations Commission to discuss ANY information related to my personal circumstances as may be necessary to help secure my full legal rights in attempting to secure or improve my housing. I authorize the Human Relations Commission to release credit, financial, employment and other information to other agencies or firms as may be essential in the solution of my housing objective.

CREDIT REPORT AUTHORIZATION AND PRIVACY DISCLOSURE FORM

- I do NOT consent to the "Credit Report Authorization and Privacy Disclosure Form".
- I DO consent to the "Credit Report Authorization and Privacy Disclosure Form". I hereby authorize and instruct the Human Relations Commission to obtain and review my credit report for any or all credit bureaus. I understand that my credit report will be obtained from a credit reporting agency chosen by the Human Relations Commission. I understand and agree that the Human Relations Commission intends to use my credit report(s) for the purpose of evaluating my financial readiness to purchase a home. My signature below also authorizes the release to credit reporting agencies of financial or other information that I have supplied to the Human Relations Commission in connection with such evaluation. Authorization is further granted to the credit reporting agency to use a copy of this form to obtain any information the credit reporting agency deems necessary to complete my credit report. In addition, in connection with determining my ability to obtain a loan: (check one) I authorize, or, I DO NOT authorize the Human Relations Commission to share with potential mortgage lenders my credit report and any information that I have provided, including any computations and assessments that have been produced based upon such information. These lenders may contact me to discuss loans for which I may be eligible. I understand that I may revoke my consent to these disclosures by notifying the Human Relations Commission in writing.

HUD REQUIRED AFFILIATED BUSINESS ENTITY, ORGANIZATION, AGENCY DISCLOSURE

I understand that the Human Relations Commission and its representative employees provide and make available a wide array of affordable housing opportunities, lending products including, where applicable, various down payment assistance programs and numerous other forms of housing assistance services. I also understand that some of the before mentioned products and/or services may be provided directly and indirectly through affiliated or partnership entities, organizations and/or agencies. I understand that I have the right to select the housing services and products of my own choosing and that I am under no obligation to utilize the offerings of such firms.

Client's Name (Printed)

Client's Name (Printed)

Client's Signature

Client's Signature

Client's Social Security Number

Client's Social Security Number

Date

Date

AUTHORIZATION TO RELEASE INFORMATION

Name: _____ Name: _____

Social Security: _____ Social Security: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Phone: _____

Lender Name: _____ Lender Phone: _____

Lender Address: _____ City: _____ State: _____ Zip: _____

Lender Contact Person: _____ Extension _____ Email: _____

Loan Number(s) _____ Loan Number(s) _____

I/We, the above referenced and undersigned to hereby grant our authorization for the lender listed above to release any requested information from and sent to any representative of the Greenville County (SC) Human Relations Commission. In addition, I/We do hereby authorize the Greenville County (SC) Human Relations Commission to discuss information with any entity or party deemed necessary for the purpose of research and resolution of our account.

I/We understand that we may revoke this authorization at any time, in writing or verbally, and that my/our information will NOT be sold or used for any kind of sales or marketing purposes.

I/We have read, understand and agree to the above referenced authorization.

Signature _____ Date _____ Signature _____ Date _____

Printed Name: _____ Printed Name: _____

Cc: File,
Greenville County
Human Relations Commission (HRC)
301 University Ridge, Suite 1600
Greenville, SC 29601-3660
Phone: (864) 467-7563
FAX: (864) 467-5965

BUDGET WORKSHEET

CATEGORY	BUDGET AMOUNT
INCOME (Take Home Pay):	(See next line)
Multiply take home pay by the number of pay periods, then divided by 12 months = Average	\$
Misc. Income (child support/alimony)=	\$
Total of ALL spendable income =	\$
EXPENSES:	
Mortgage or Rent	
Homeowners/Renters Insurance	
Property Taxes	
Home Repairs/Maintenance/HOA Dues	
UTILITIES:	
Electricity	
Water and Sewer	
Natural Gas or Oil	
Telephone (Land Line, Cell)	
FOOD:	
Groceries	
Eating Out, Lunches, Snacks	
FAMILY OBLIGATIONS:	
Child Support/Alimony (that you pay)	
Day Care, Babysitting	
HEALTH AND MEDICAL:	
Out-of-Pocket Medical Expenses	
Fitness (Gym membership)	
TRANSPORTATION:	
Car Payments	
Gasoline/Oil	
Auto Repairs/Maintenance/Fees	
Auto Insurance	
DEBT PAYMENTS:	
Credit Cards (total of all accounts)	
Student Loans	
Other Loans (total of all accounts)	
ENTERTAINMENT/RECREATION:	
Cable TV/Videos/Movies	
Internet Service Fee	
Hobbies	
Subscriptions and Dues	
Vacations	

PETS:	
Food	
Grooming, Boarding, Vet Expenses	
CLOTHING (annual + 12 months) =	\$
SAVINGS:	
Savings	
Emergency Fund	
MISCELLANEOUS:	
Toiletries, Household Products	
Gifts/Donations	
Grooming (Hair, Make-up, Other)	
Miscellaneous Expense	
Total Expenses	
Income minus Expenses =	\$
After you subtract expenses from income, if you have a positive amount (surplus), and have accounted for all expenses, then you are living within your means.	
After you subtract your expenses from income, if you have a negative amount (deficit), then you are living beyond your means. This is resolved by either increasing your income, decreasing your expenses or a combination of both.	