



Dear Homeowner,

Thank you for requesting assistance for foreclosure prevention by RIHousing.

To complete your request, you must first fill out our Financial Information Package and send us the required documents which are needed to process your request for assistance. Please use the required documents checklist attached. **Please do not send original documents.** You can send the completed application and required documents packet to us by facsimile, mail, or e-mail.

You may also simply drop them off at our office:

RIHousing HelpCenter
44 Washington Street
Providence, RI 02903
Email: Helpcenter@rihousing.com
Fax: 401-450-1373

Please return your financial information packet as soon as possible, as this is a time-sensitive process.

Once we have received your application packet, you will be assigned to a HUD Counselor. The HUD Counselor will follow up with you to review your options and/or discuss additional information that may be needed.

**If you have any questions or need any assistance with the application, please contact us at:
(401) 457-1130.
TTY:877-243-2823 then enter 401-868-9090**

Thank you for reaching out to the RIHousing HelpCenter.

Sincerely,

RIHousing HelpCenter

NOTE: *If you have an impairment, disability, language barrier, or otherwise require an alternative means of completing this form or accessing information about our housing counseling program, please inform our housing counselor program staff so alternative accommodations may be arranged.*



REQUIRED DOCUMENTS CHECKLIST

Please **DO NOT** Send Originals
Single-sided Copies Please

1. Copy of Drivers License or State ID
2. HelpCenter Authorization/Disclosure, Dodd Frank, Homeowner/Counselor Agreement, and Consent to the Use of Tax Return Information Forms – signed and dated by all borrowers (pgs. 7-12).
3. Most recent pay stubs – 30 consecutive days of pay stubs for all borrowers/ contributors (person other than mortgage holder). Contributors must send signed and dated contribution amount letter.
4. Proof of all other sources of income for borrowers/contributors (SSI, SSDI, child support, rental income etc.) Most recent benefit award letter for all SSI, SSDI, TDI and/or Unemployment income being received. If receiving Government Assistance (ex. SNAP), please include the Quarterly Benefit Statement. Rental income leases. If Self Employed, must provide most recent quarterly or year to date Profit & Loss Statement. Statement must be signed and dated.
5. Two years of recent Federal Tax Returns – signed tax returns for the last two years (personal and business) with all schedules and W-2's. If no tax returns, then a letter, signed and dated, explaining why no taxes were filed.
6. Two months of recent bank statements from all saving & checking accounts, all pages, front and back, for the last two months (personal and business). Transaction history is not acceptable.
7. Most recent mortgage statement with loan number and lender/servicer contact information.
8. Hardship Letter – signed and dated by all borrowers (pg. 6).
9. Delinquency letters/notices – mediation, conciliation, tax sale, or foreclosure notices, if applicable.
10. Property tax bill – only if current mortgage payment does not include an escrow payment.
11. Homeowners Insurance Policy – declaration page(s). Only if current mortgage payment does not include and escrow payment.
12. Bankruptcy discharge notice, if applicable.
13. Court Orders – Final Divorce Decree, Alimony, and Child support payments, if applicable
14. Homeowners Association Fee Statement, if applicable.
15. Most recent utility bill – at least one gas, electric, or cable bill.



Borrower Information

BORROWER		CO-BORROWER	
Borrower's Name		Co-Borrower's Name	
Social Security Number	Date of Birth (month/day/year)	Social Security Number	Date of Birth (month/day/year)
Primary Phone Number With Area Code		Primary Phone Number With Area Code	
Secondary Phone Number		Secondary Phone Number	
Email Address		Email Address	
Mailing Address		Mailing Address	
Present Address (If Same As Mailing Address, Write Same)		Present Address (If Same As Mailing Address, Write Same)	
<input type="checkbox"/> Married <input type="checkbox"/> Unmarried (includes single, divorced, widowed) <input type="checkbox"/> Separated		<input type="checkbox"/> Married <input type="checkbox"/> Unmarried (includes single, divorced, widowed) <input type="checkbox"/> Separated	
Yrs School _____		Yrs School _____	
Military Status: <input type="checkbox"/> N/A <input type="checkbox"/> Active <input type="checkbox"/> Veteran		Military Status: <input type="checkbox"/> N/A <input type="checkbox"/> Active <input type="checkbox"/> Veteran	
Are you a US Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you a US Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you a Permanent Resident Alien? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you a Permanent Resident Alien? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Number of people in household. _____

Name	Relationship to Applicant	Age

Employment Information

BORROWER	CO-BORROWER
<input type="checkbox"/> Employed <input type="checkbox"/> Unemployed <input type="checkbox"/> Self-employed	<input type="checkbox"/> Employed <input type="checkbox"/> Unemployed <input type="checkbox"/> Self-employed
Employer _____	Employer _____
Work Phone Number With Area Code _____	Work Phone Number With Area Code _____
# Of Years at Current or Most Recent Job _____	# Of Years at Current or Most Recent Job _____
Position/Title _____	Position/Title _____

Property Information

<input type="checkbox"/> Single Family <input type="checkbox"/> Multi-family (1-4 Units) <input type="checkbox"/> Condo		Property Purchase Date _____
Property Condition: <input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor		Estimated Property Value _____
I want to: <input type="checkbox"/> Keep the Property <input type="checkbox"/> Sell the Property	This property is my: <input type="checkbox"/> Primary Residence <input type="checkbox"/> Second Home <input type="checkbox"/> Investment	
Is the property listed for sale? <input type="checkbox"/> Yes <input type="checkbox"/> No	Have you contacted a credit-counseling agency for help? <input type="checkbox"/> Yes <input type="checkbox"/> No	
For Sale by Owner? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please complete counselor contact information below.	
Agent's Name: _____	Counselor's Name: _____	
Agent's Phone Number: _____	Counselor's Phone Number: _____	
Have you received an offer on the property? <input type="checkbox"/> Yes <input type="checkbox"/> No	Counselor's Email: _____	
Date of Offer _____ Amount of Offer \$ _____		
Have you received a foreclosure sale date? <input type="checkbox"/> Yes Foreclosure Date _____ <input type="checkbox"/> No		
Have you received a notice of Mediation or Conciliation? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Have you filed for bankruptcy? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes: Chapter 7 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Filing Date: _____		
Has your bankruptcy been discharged? <input type="checkbox"/> Yes <input type="checkbox"/> No Bankruptcy Case Number: _____ Attorney: _____		

Mortgage Information

First Mortgage Lender/Service Name		
First Mortgage Loan Number	Balance	Interest Rate
Monthly Payment Amount (Principal, Interest, Taxes, and Insurance)		
Monthly Mortgage Insurance Payment (If Applicable)		
Are you current on your First Mortgage? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, are you in danger of falling delinquent? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Has your mortgage ever been modified or have you entered into a forbearance plan? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Have you received Hardest Hit Funds in the past: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Who pays the real estate tax bill on your property? <hr/> Are the taxes current? <input type="checkbox"/> Yes <input type="checkbox"/> No Condominium or HOA Fee: <input type="checkbox"/> Yes \$ _____ <input type="checkbox"/> No Paid to: _____	Who pays hazard insurance policy for your property? <hr/> Is the policy current? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you have a second mortgage/ Home Equity Loan? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, provide detail below.		
Second Mortgage Lender/Service Name		
Second Mortgage Loan Number	Balance	Interest Rate
Monthly Payment Amount (Principal, Interest, Taxes, and Insurance)		
Monthly Mortgage Insurance Payment (If Applicable)		
List other Liens/Mortgages or Judgments on this property, please name the person(s), company or firm and their telephone numbers.		
Lien Holder's Name/Service _____ Balance _____		
Contact Number _____ Loan Number _____		

Information for Government Monitoring Purposes

The following information is requested by the federal government in order to monitor compliance with federal statutes that prohibit discrimination in housing. **You are not required to furnish this information, but are encouraged to do so. The law provides that a lender or servicer may not discriminate either on the basis of this information, or on whether you choose to furnish it.** If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation. If you do not furnish ethnicity, race, or sex, the lender or servicer is required to note the information on the basis of visual observation or surname if you have made this request for a loan or grant in person. **If you do not wish to furnish the information, please check the box below.**

BORROWER	<input type="checkbox"/> I do not wish to furnish this information	CO-BORROWER	<input type="checkbox"/> I do not wish to furnish this information
Ethnicity:	<input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	Ethnicity:	<input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino
Race:	<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White	Race:	<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White
Sex:	<input type="checkbox"/> Female <input type="checkbox"/> Male	Sex:	<input type="checkbox"/> Female <input type="checkbox"/> Male



Monthly Income/Expenses For Household

INCOME/EXPENSES FOR HOUSEHOLD						
1 - Monthly Household Income			2 - Household Assets		3 - Monthly Household Expenses/Debt	
	Borrower 1	Borrower 2	Estimated Value of this Property	\$	First Mortgage Payment	\$
Gross Salary/Wages = total monthly income before any tax withholding or employer deductions. Gross Salary/Wages	<input type="checkbox"/> Employed <input type="checkbox"/> Unemployed	<input type="checkbox"/> Employed <input type="checkbox"/> Unemployed	Estimated Value of Other Real Estate Owned	\$	Property Taxes (If not escrowed)	\$
			Checking Account(s) Balance	\$	Insurance – Hazard, Wind, Flood etc. (If not escrowed)	\$
			Saving Account(s)/Money Market Balance	\$	HOA/Condo Fees	\$
			Life Insurance Cash Value	\$	Other Mortgages	\$
			IRA/Keogh Account(s) Balance	\$	Liens/Rents	\$
			401K/ESOP Account(s) Balance	\$	Alimony Payment	\$
			Stocks/Bonds/CDs Balance	\$	Child Support Payment	\$
Overtime	\$	\$	Other Investments	\$	Dependent Care Payment	\$
Tips, commissions, and/or bonus income	\$	\$			Personal Loans/Student Loans	\$
Self employed	\$	\$			Auto Loans	\$
Child Support Income/Alimony Income*	\$	\$			Auto Expenses/Gasoline	\$
Social Security/SSDI	\$	\$			Auto Insurance	\$
Other monthly income from pensions, annuities or retirement plans	\$	\$			Medical Expenses	\$
Rental income	\$	\$			Medical Insurance	\$
Unemployment Income	\$	\$			Phone(s)/Cable/Internet	\$
Food Stamps/Welfare	\$	\$			Credit Card(s)/ Installment Loans	\$
Contributor Income	\$	\$			Groceries/Household Supplies	\$
Other (investment, income, royalties, interest, dividends, etc.)	\$	\$			Spending Money	\$
					Utilities/Water/Sewer	\$
					Donations	\$
			Other _____	\$		
Total Income (Gross)	\$	\$	Total Assets	\$	Total Debt/Expenses	\$

***** ALL INCOME MUST BE DOCUMENTED *****

Include combined expenses from the borrower and co-borrower (if any).

If you include income and expenses from a household member who is not a borrower, please specify using a separate page if necessary.

*You are not required to disclose Child Support, Alimony or Separation Maintenance Income, unless you choose to have it considered by your lender/servicer.

If additional space is needed, please include an additional page.



HelpCenter Authorization / Disclosure Form

Rhode Island Housing and Mortgage Finance Corporation's ("RIHousing") HelpCenter is a HUD-approved counseling agency that provides foreclosure prevention counseling services to homeowners in the State of Rhode Island. We serve all clients regardless of income, race, color, religion/creed, sex, national origin, age, family status, disability, or sexual orientation/gender identity. We administer our programs in conformance with local, state, and federal anti-discrimination laws. As a participant in our counseling program, please read this Authorization/Disclosure and indicate your understanding and consent by signing and dating page 2.

Note: if you have an impairment, disability, language barrier, or otherwise require an alternative means of reviewing and completing this Disclosure, please talk to us about arranging alternative accommodations.

1. I understand that RIHousing provides foreclosure prevention counseling (the "Counseling Services") and I request that RIHousing provide me such assistance. An overview of the range of the Counseling Services that I am entitled to receive is set forth on Attachment A. I understand that I have a choice with respect to housing counseling agencies approved by the U.S. Department of Housing and Urban Development ("HUD"), and am not required to use RIHousing to provide the Counseling Services.
2. I authorize RIHousing to contact my mortgage lender or servicer _____ (collectively, the "Mortgagee") on my behalf regarding any loan secured by my property located at _____ (the "Loan") and to obtain from such Mortgagee any information regarding my Loan that RIHousing deems necessary to provide the Counseling Services.
3. I have provided RIHousing information regarding my personal finances and authorize RIHousing to obtain a credit report on me in order to provide the Counseling Services (this information, along with the information obtained from the Mortgagee, the "Financial Information").
4. I understand and agree that RIHousing will use the Financial Information to evaluate my options regarding the Loan and to develop an action plan consisting of recommendations for handling of the Loan and my finances, which will be presented to me.
5. I understand that the Loan and the Financial Information will be discussed with the Mortgagee and that I may or may not be present during the discussion.
6. I authorize RIHousing to pull my credit report. I understand that in lieu of a new credit pull, I may provide RIHousing with a copy of my credit report. I agree that this credit report will be dated within 30 days of the intake date
7. I may be referred to other housing services of RIHousing or another agency or agencies as appropriate that may be able to assist with particular issues that have been identified. I understand that I am not obligated to use any of the services offered to me.
8. I understand that RIHousing provides a variety of lending and mortgage products, including: mortgage loans to low- and moderate-income homebuyers and homeowners; home repair loans; septic system replacement loans; sewer tie-in loans; lead abatement loans; and loans for home modification to assist disabled residents. The loans described above may also be originated by participating lenders or third-party brokers, who are compensated by RIHousing for their origination services. I further understand that I am not obligated to use or receive any other products or services from RIHousing or its participating lenders or brokers.

9. RIHousing offers a variety of mortgage-related services, including: first-time homebuyer training and landlord training. I understand that I am not obligated to use or receive any of these other services from RIHousing. If I already receive mortgage-related services from RIHousing, I understand that I am not obligated to use RIHousing for the Counseling Services and may choose from among HUD-approved housing counseling agencies.
10. I understand that RIHousing's HelpCenter is a HUD certified counseling agency and that, as such, RI Housing may receive federal funds from HUD or another funding source. Due to the nature of these relationships, RIHousing may be required to make information relating to my loan, my financial information, and any other information in my counseling file available to HUD or another funding source for program monitoring and compliance purposes. Further, I authorize RI Housing, HUD, or any other funding source to contact me for program evaluation purposes.
11. I understand that a counselor may answer questions and provide information, but not provide legal advice. The Counseling Services are not a substitute for legal advice. If I want legal advice, I will be referred for appropriate assistance.
12. I, with the intention of binding my heirs, executors, and administrators (collectively, the "Releasing Parties") agree that RIHousing, its employees, directors, officers, commissioners, agents, successors, and assigns (collectively, the "Released Parties") are not liable for any claims or causes of action arising from errors or omissions in connection with the Counseling Services and hereby release, waive, discharge, and covenant not to sue the Released Parties for any and all claims or liabilities relating in any way to the Counseling Services. I understand and agree that the purpose and intent of this disclaimer of liability is to release and fully and forever extinguish each and every claim, demand, and cause of action that the Releasing Parties may have against Released Parties with respect to the Counseling Services.
13. I acknowledge that I have read this Disclosure and represent that I have the legal capacity to understand it and to be fully bound thereby. I further acknowledge that I am executing this Disclosure by my own free will and not under duress. My decision to receive the Counseling Services and execute this Disclosure is a fully formed decision and I am aware of all legal and other ramifications of such decision. If any provision of this Disclosure is held to be unenforceable or invalid under any applicable law or by any court or competent governmental authority having jurisdiction thereover, I agree that the remaining provisions of this Disclosure shall continue in full force and effect without being impaired or invalidated in any way.
14. I acknowledge that I have received a copy of RIHousing's Privacy Policy.

Loan Number

Last 4 Digits SSN

Name (Print)

Signature

Date

Name (Print)

Signature

Date

Attachment A

Outline of Counseling Services

The following is an outline of the Counselling Services which are provided as part of this program:

1. The Intake Counselor reviews the homeowner's financial situation. In order to complete this review, the counselor obtains a credit report and collects income and expense documentation. This allows the Counselor to analyze the homeowner's financial capacity and determine if there is a hardship.
2. If, based upon this intake and initial file, mortgage fraud is suspected, we may refer the case to the Consumer Protection Division of the Rhode Island Attorney General and the Rhode Island Department of Business Regulation.
3. Based on the review of the information developed through the intake, and any supplemental information submitted, we will work with you to develop an action plan to seek relief, including steps you may need to take to control household expenses, and any additional documents you must submit.
4. We will review your situation to determine potential eligibility for loss mitigation options using investors and lender's proprietary programs.
5. We will assist you in preparing a household budget to help you manage your debt, expenses, and savings.
6. If appropriate, we will inform you of other local programs and resources that may be available to assist you. Examples of these services and programs include Food Stamps, Heating Assistance programs, Community Action Program agencies, alternative housing options, utility assistance, financial management assistance (through Money Management International), legal aid services (through Rhode Island Legal Services or the Rhode Island Bar Association), and the like.
7. If appropriate, we will assist you in preparing a hardship letter for submission to your lender/servicer to support your request for a work out option. We will maintain communication with you and your lender/servicer to monitor the status of your loan workout request and to ensure that all necessary documentation is submitted on time.
8. We will review and evaluate any written work out proposal you receive from your lender/servicer to help you determine whether to accept the proposal.
9. We will ask you whether you have been offered questionable mortgage foreclosure prevention assistance, including proposals that guarantee a successful outcome; require payment in advance of the provision of assistance; require that you stop making mortgage payment or require redirection of your mortgage payments to someone other than your lender/servicer; involve signing over title to your home to a third-party. If we suspect that improper practices are present we will report the practices to the Consumer Division of the Rhode Island Attorney General and the Loan Modification Scam alert website.

Dodd-Frank Certification

The following information is requested by the federal government in accordance with the Dodd-Frank Wall Street Reform and Consumer Protection Act (Pub. L. 111-203). You are required to furnish this information. The law provides that no person shall be eligible to receive assistance from the Making Home Affordable Program, or Hardest Hit Program, authorized under the Emergency Economic Stabilization Act of 2008 (12 U.S.C. 5201 et seq.), or any other mortgage assistance program authorized or funded by that Act, if such person, in connection with a mortgage or real estate transaction, has been convicted, within the last 10 years, of any one of the following: felony, larceny, theft, fraud, or forgery, (B) money laundering or (C) tax evasion.

I/we certify under penalty of perjury that I/we have not been convicted within the last 10 years of any one of the following in connection with a mortgage or real estate transaction:

- (a) felony larceny, theft, fraud, or forgery,
- (b) money laundering or
- (c) tax evasion.

I/we understand that Rhode Island Housing and Mortgage Finance Corporation (“Rhode Island Housing”), the servicer, the U.S. Department of the Treasury, or their agents may investigate the accuracy of my statements by performing routine background checks, including automated searches of federal, state and county databases, to confirm that I/we have not been convicted of such crimes. I/we also understand that knowingly submitting false information may violate Federal law.

This Certificate is effective on the earlier of the date listed below or the date received by your servicer.

Borrower Signature

Date

Co-Borrower Signature

Date



Homeowner/Counselor Agreement

The RIHousing Help Center and its counselors agree to provide the following services:

- Development of a financial budget to determine homeowner’s income, expenses and affordability
- Analysis of the mortgage default, including the amount and cause of default
- Presentation and explanation of reasonable options available to the homeowner
- Submit homeowner’s file to the lender for review for all retention and/or liquidation options available, based on the homeowner’s eligibility and needs
- Communicate with the mortgage servicer and/or investor and provide the homeowner with requests for any additional/updated information as needed
- Timely completion of action plan
- Explanation of collection and foreclosure process
- Identify and provide homeowner with information on additional resources that may be available
- Confidentiality, honesty, respect and professionalism in all services
- The HelpCenter cannot control the lender’s processing time or decision
- The HelpCenter cannot and does not provide legal advice or representation. The informational services provided by the HelpCenter are not a substitute for legal advice. The HelpCenter encourages homeowners to contact an attorney if they feel they need legal advice or services

I/We _____ agree to the following terms of service:

I/We will always provide honest and complete information to my/our counselor, whether verbally or in writing.
 I/We will be on time for appointments and understand that if I/we are late for an appointment, the appointment may have to be rescheduled
 I/We will call within 24 hours of any future scheduled appointment(s) if I/we will be unable to attend an appointment.
 I/We will follow up with our mortgage servicer and/or investor, on a bi-weekly basis, and provide the counselor with any updates as well as provide the counselor with any correspondence or requests for any additional documentation.
 I/We will provide all necessary documentation and follow-up information within 72 hours from the time requested.
 I/We will contact the counselor about any changes in my/our situation immediately.
 I/We will make an appointment with my/our counselor should any follow up face to face meeting be needed.
 I/We understand that RIHousing will provide one counseling session per calendar year.
 I/We understand that breaking this agreement may cause the HelpCenter to terminate its service assistance to me/us.
 I/We understand that the HelpCenter is not providing legal advice or representation, and that the informational services provided by the HelpCenter are not a substitute for legal advice. I/We understand that I/we should contact an attorney if we wish to receive legal advice or services.

_____	_____
Homeowner	Date
_____	_____
Homeowner	Date
_____	_____
Homeowner	Date
_____	_____
Counselor	Date
_____	_____
Counselor	Date

FACTS
WHAT DOES RIHOUSING DO WITH YOUR PERSONAL INFORMATION?

Why?	<p>Financial companies choose how they share your personal information. Federal law gives customers the right to limit some but not all sharing. Federal law also gives customers the right to view personal records, and to correct a record that is inaccurate or incomplete. Federal law requires us to tell you how we collect, share, and protect your personal information.</p> <p>We provide this notice to customers at the time of application for RIHousing programs, products, or services, and annually thereafter. From time to time, we may revise this notice to reflect changes in the law or changes in our policies. Please read this notice carefully to understand what we do.</p>
What?	<p>The types of personal information we collect and share depend on the product or service you have with us. This information can include:</p> <ul style="list-style-type: none"> ▪ Social Security Number ▪ Income ▪ Account balance ▪ Payment history ▪ Credit history ▪ Credit score ▪ Date of birth ▪ Medical information and blood lead level test results (for lead hazard reduction programs) <p>When you are no longer our customer, we continue to share your information as described in this notice.</p>
How?	<p>All financial companies need to share customers' personal information to run their everyday business. In the section below, we list the reasons financial companies can share their customers' personal information; the reason RIHousing chooses to share; and whether you can limit this sharing.</p>

Reasons we can share your personal information	Does RIHousing share?	Can you limit this sharing?*
For our everyday business purposes – such as to process your transactions, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus	Yes	No
For our marketing purposes – to offer our products and services to you	Yes	No
For joint marketing with other financial companies	No	N/A
For our affiliates' everyday business purposes – information about your transactions and experiences	No	N/A
For our affiliates' everyday business purposes – information about your creditworthiness	No	N/A
For nonaffiliates to market to you	No	N/A

*If N/A, RIHousing does not share your personal information so your ability to limit is not applicable.

Questions?	Call (800) 854-1180 or (401) 457-1180
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Who we are	
Who is providing this notice?	Rhode Island Housing and Mortgage Finance Corporation (“RIHousing”)

What we do	
How does RIHousing protect my personal information?	To protect your personal information from unauthorized access and use, we use security measures that comply with federal and state law and regulation. These measures include computer safeguards and secured files and buildings.
How does RIHousing collect my personal information?	<p>We collect your personal information, for example, when you:</p> <ul style="list-style-type: none"> ▪ Apply for financing ▪ Give us your contact information ▪ Give us your employment history ▪ Give us your income information ▪ Show us your driver’s license <p>We also collect your personal information from government agencies, public sources, and others, such as credit bureaus, affiliates, or other companies.</p>
Why can’t I limit all sharing?	<p>Federal law gives you the right to limit only:</p> <ul style="list-style-type: none"> ▪ Sharing for affiliates’ everyday business purposes – information about your creditworthiness ▪ Affiliates from using your information to market to you ▪ Sharing for nonaffiliates to market to you

Definitions	
Affiliates	<p>Companies related by common ownership and control. They can be financial and nonfinancial companies.</p> <ul style="list-style-type: none"> ▪ <i>Our affiliates include Rhode Island Housing Development Corporation, Rhode Island Housing Equity Corporation, Rhode Island Housing Equity Pool, L.P., and Rhode Island Housing Equity Pool-I, L.P.</i>
Nonaffiliates	<p>Companies not related by common ownership or control. They can be financial or nonfinancial companies.</p> <ul style="list-style-type: none"> ▪ <i>RIHousing does not share your personal information with nonaffiliates so they can market to you.</i>
Joint marketing	<p>A formal agreement between nonaffiliated financial companies that together market financial products or services to you.</p> <ul style="list-style-type: none"> ▪ <i>RIHousing does not jointly market.</i>

Other important information	
<p>Service providers with whom we share information for everyday business purposes may include coupon or statement printers, billing services, payment processing companies, mail, print, and telephone service companies, insurers, property inspection firms, government agencies, attorneys, laboratories, community action programs, auditors, quality control vendors, consultants, or other service providers.</p>	

Provisions pertaining to protected medical information	
<p>In the context of carrying out certain residential lead hazard reduction programs, RIHousing may receive certain medical information. A customer’s rights with respect to protected medical information include (a) the right to request restrictions on certain uses and disclosures, subject to denial by RIHousing; (b) the right to receive confidential communications of the information; (c) the right to inspect and copy the information; (d) the right to amend the information; (e) the right to receive an accounting of disclosures of the information; and (f) the right to obtain a paper copy of this notice upon request. A customer may complain to RIHousing if they believe their privacy rights have been violated by writing a letter addressed to RIHousing, 44 Washington Street, Providence, RI 02903, ATTN: Lead Program. A customer will not be retaliated against for filing a complaint.</p>	



Fax

To: HelpCenter

From:

Fax: 401-450-1373

Pages:

Date:

Re: HelpCenter Financial Information Package

Comments: