

# 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. 2502-0573  
(Exp. 10/31/2017)

See last page for public burden statement.

This form is to be used by all organizations requesting HUD approval as a housing counseling agency, including, Local Housing Counseling, Intermediary, or Multi-State Organization. Before applying, HUD recommends applicants review HUD Handbook 7610.1, 24 CFR Part 214, and information on HUD's website at: <http://www.hud.gov/housingcounseling>. State Housing Finance Agencies are not required to submit an application for HUD approval but must comply with the requirements outlined in this form in order to participate in the Housing Counseling Program.

**Applicants must visit the above website and click on "How to Become a HUD Approved Housing Counseling Agency" for instructions prior to submitting their application. All applications and questions must be sent electronically to [housing.counseling@hud.gov](mailto:housing.counseling@hud.gov). Write "Application for HUD Approval" in the subject line.**

The application will be reviewed within 60 days of receipt. If, after review of the application, HUD determines that the applicant may qualify as a HUD-approved housing counseling agency, a conference may be arranged before a final determination letter is issued. The applicant will be notified whether the application was approved or denied. HUD will contact you if a correctable deficiency exists in your agency's application. If approved, a Letter of Approval will be sent to the applicant.

Note: HUD may, at its discretion, request clarification or additional information from an agency for use in determining the agency's eligibility for the Housing Counseling Program. 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.

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

Official Name of the Organization:

**Address of the Main Office:** (list branch & affiliate offices in **Section D** on page 10 of this form)

Website Address (if applicable)

Street Address

City

State

Zipcode

Acronym; aka, or dba, if applicable:

Executive Director's Name:

Counseling Program Manager's Name:

Name and Title of Authorized Person:

Telephone Number of Authorized Person:

Counseling Program Manager's Title:

Signature of Authorized Person:

Agency Telephone Number:

Date Signed:

Agency E-mail Address:

Agency Federal Taxpayer Identification Number (TIN):

Name of Agency Point of Contact for HUD on matters involving this application:

POC Telephone number:

POC E-mail:

POC FAX number:

**Type of Organization** - Please check one box

**National Intermediary Organization** – Provides, in multiple regions of the United States: (i) housing counseling services through its branches and/or affiliates, which are physically located in nine or more states; and (ii) training, technical assistance, oversight, and pass-through funding to its network of branches and/or affiliates.

**Regional Intermediary Organization** – Provides, in a generally recognized region within the United States, such as the Southwest, Mid-Atlantic, New England: (i) housing counseling services through its branches and/or affiliates, which are physically located in eight or fewer states; and (ii) training, technical assistance, oversight, and pass-through funding to its network of branches and/or affiliates.

**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)** – Provides housing counseling and education services directly 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 two 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 of all States in which your organization provides counseling services:

[Empty text box for listing states]

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

Is your organization Faith-Based? Yes No

*(Faith-based organizations must recognize that their non-discrimination responsibilities are not only to serve anyone who is eligible for counseling, but also that they must affirmatively conduct outreach to those least likely to apply for the services, even if they are not members of the organization’s faith group.)*

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** - 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:**

- PPC – Pre-Purchase Counseling
- FHW – Fair Housing Pre-Purchase Education Workshops \*
- PLW – Predatory Lending Education Workshops \*
- PPW – Pre-Purchase Homebuyer Education Workshops \*

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

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

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

- FBC – Financial Management/Budget Counseling
- FBW – Financial, Budgeting and Credit Workshops \*
- HIC – Home Improvement and Rehabilitation Counseling
- RMC – Reverse Mortgage Counseling
- NDW – Non-Delinquency Post-Purchase Workshops for Homeowners

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

- RHC – Rental Housing Counseling
- RHW – Rental Housing Workshops \*

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

- Services for Homeless Counseling

**F. 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.

Intermediaries and multi-state organizations must also respond to items 1 – 5 on behalf of the main office even if housing counseling services are not directly provided there. Item 4 B, however, is not applicable if direct services are not provided at the main office.

Intermediaries 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 non-profit entities.

*O R*

**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.

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- 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.

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- 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.

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- 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) Provide a written supervisory monitoring and quality control compliance procedures plan for monitoring the work of the housing counselors. The plan must describe in detail the supervisor review procedures and outline corrective actions to be initiated immediately when discrepancies are found. This must include reviewing client files with the counselors to determine the adequacy and effectiveness of the counseling and how often the supervisor will review and monitor counselors' work.
- 5) Identify counselors fluent in other languages. List the non-English languages available for each office.
- 6) 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.

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**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 photograph copies of the facility that include signage; meeting space for private in-person counseling, as well group education sessions; storage area(s) for client files; and facility space accessible to disabled and elderly clients.
- 2) Indicate whether your agency shares any part of its facility with any other organizations. If so, identify the organizations and explain the relationships that exist between your agency and those organizations.
- 3) Indicate the agency's operating hours and extended hours when necessary.
- 4) 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.
- 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, including relevant grant agreements, from entities and/or individuals committing resources to the housing counseling program. The funding commitment documentation must include: (i) the identity of the entity or individual committing the resources; (ii) the dollar value of the commitment; (iii) an indication that the resources will be available during the initial 12-month period of HUD approval or program participation; and (iv) the signature, title, telephone number and e-mail address of the individual or entity official legally able to make the funding commitment.
- 2) Submit a copy of your current annual housing counseling budget. Only include income and expenses associated with your housing counseling program.
- 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. The financial statement must include an auditor's review report, a treasurer's report and any supplemental schedules.

**D. Community Resources:** Submit a list of the names and addresses of the local, State, Federal, public and private agencies with whom your agency and branches or affiliates have established working relationships and may refer your clients when additional services not offered by your agency are needed. Include a brief description of the type(s) of community resources or services each agency listed will provide for your clients, and explain the nature of the working relationships between your agency and each of these community resources. 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 the nature and extent of any additional housing programs or activities, other than housing counseling services, that your 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. Explain your agency's plans to avoid conflicts of interest, as well as the personnel policies and practices to prevent and, if necessary, remedy real or apparent conflicts of interest. Additionally, identify any external housing programs, products or activities 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 or products 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 use any other services or products offered by the agency, its branches or affiliates or any industry partners, and that receiving housing counseling services is not contingent on the use of any service or product. Furthermore, the agency must also provide information on at least three other relevant alternative services, programs, or products.

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6 **Client Management System:** Identify the automated housing counseling Client Management System (CMS) 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. The CMS must provide data, as required by HUD, on the agency's profile and counselors. At the time of application to HUD's Housing Counseling Program, and prior to approval, agencies must utilize a CMS that satisfies HUD's requirements and interfaces with HUD's databases to download required information into HUD's Housing Counseling System. For additional guidance on the required CMS, see the information on HUD's website, as referenced on Page One of this application.

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

- 1) Official name
- 2) Federal Taxpayer Identification Number (TIN), if applicable
- 3) Physical address, including zip code
- 4) Mailing address if different from address on line 2 above
- 5) Telephone number(s), including toll-free if available
- 6) Name, title, and telephone number of the person in charge of the housing counseling program at each location

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8 **Intermediary Activities:** For intermediaries, describe and date the organization's experience in operating as a housing counseling intermediary. In connection with the intermediary's activities and parent entity responsibilities related to branches and affiliates, describe, quantify, as applicable, and provide documentation related to the policies and procedures to: (i) provide training and technical assistance; (ii) perform oversight and monitoring; (iii) monitor financial performance, including the use of pass-through funding; (iv) perform accounting of administrative costs; (v) ensure compliance with federal regulations, OMB Circulars A-110 and A-133, and other federal guidelines; and (vi) perform any other housing counseling intermediary activities.

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**PART 2 - HOUSING COUNSELING WORK PLAN**

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Submit a concise but detailed 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 work plan 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.

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**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.

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**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.

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**3 Affirmatively Furthering Fair Housing:** Identify the barriers to fair housing choice in your agency's proposed target area. Describe the counseling, education, outreach and other activities that the agency provides to affirmatively further fair housing for classes protected under the Fair Housing Act. The persons least likely to be aware of or pursue housing opportunities within a particular housing market area are likely the ones who need housing counseling services the most.

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**4 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.

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5 **Outcomes:** Describe the anticipated results (outcomes) to be achieved within the initial period of approval. For each category of housing counseling activity described above in “Description of Services,” provide the projected number of households your agency will serve during the initial 12-month period of HUD approval or program participation.

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6 **Alternative Settings/Formats:** Describe, if applicable, the alternative settings or formats your agency will utilize to provide housing counseling services in your target area(s) as a result of either mutual agreement with the client or the inaccessibility of your facilities. Alternative formats can include telephonic counseling or remote counseling systems designed to use Skype technology, video cameras and the Internet.

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7 **Client Follow-up:** Explain your agency’s plan for follow-up communication with clients to ensure that you are in compliance with the requirements of HUD Handbook 7610.1 and 24 CFR Part 214.

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8 **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 HUD Handbook 7610.1 and 24 CFR Part 214.

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9 **Non-English Speaking or Limited English Proficiency (LEP) Clients:** Describe how you plan to serve non-English speaking or LEP clients.

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**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, the Age Discrimination Act of 1975; and Title IX of the Education Amendments of 1972.
  - 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, if applicable, the management and liquidation services.
  - E. Comply with the fee guidelines set forth in HUD Handbook 7610.1 and 24 CFR Part 214, if we plan to charge counseling fees.
  - F. Accept all clients that our agency has the capacity to serve and affirmatively outreach to those least likely to apply for the agency’s housing counseling services.
  - G. Provide HUD with all required Housing Counseling Program data and information, in a timely manner, for use by HUD both internally and externally on HUD’s web listing and other media.

**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 facilities provide accessibility features for persons with disabilities and elderly persons, or we will arrange to meet with such persons at an alternative accessible location or format.
- 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 214.
- G. I further certify that the information submitted in response to this *Application for Approval as a Housing Counseling Agency* is accurate.

**Note:** 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. HUD may change any agency's status through either a request submitted to HUD or as a result of information obtained by HUD.

Name of Authorized Agency Representative:

Title of Authorized Agency Representative:

Original Signature:

Date:

**SECTION D - Space for additional Information**

**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 of 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 eligibility for Program participation 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.