

ROOTED COMMUNITIES

Dear Customer,

Thank you for your interest in Rooted Communities. We are here to assist you through the home buying process. As a HUD Approved Housing Counseling Agency, we are here to help you understand your credit and its impact, financial management/budget counseling, resulting in the “Dream of Homeownership.”

If you are interested in purchasing a home and would like to discuss all your options, please fill out the application provided and mail it back to the Sarasota address below. **There will be a \$47.50 charge per person to retrieve your tri-merged credit report including risk score. Please include a money order made payable to Rooted Communities and enclose it with the application. (No personal checks or cash will be accepted.)**

Once your application has been received you will be contacted by our certified housing counselor to set up a one-on-one appointment to discuss your plans and options of becoming a homeowner. Please return completed application with all disclosures, documentation, and money order to the address below.

Thank you for your interest and we look forward to meeting you!

Sincerely,

Laura Carter

Laura Carter
Executive Director

8466 Lockwood Ridge Rd #157, Sarasota, FL 34243

941.809.2231

email: exd@rootedcommunities.org

www.rootedcommunities.org

ROOTED COMMUNITIES

CHECKLIST OF WHAT YOU SHOULD BRING TO YOUR APPOINTMENT

	Recent paycheck stub with indicates YTD earnings
	Proof of residence (For example, a receipt for rent, copy of a recent utility bill – FPL, cable, telephone, etc.)
	Proof of child support/alimony
	Proof of Social Security Retirement/Disability Income
	Proof of investment income (i.e. income from savings accounts, mutual funds, CD's, stocks, bonds, life insurance)
	Retirement Income (i.e. 401(k), IRA, pension)

Housing Counseling by phone appointment only, if face-to-face interview is necessary, it will be done at the following location:

Goodwill Manasota Job Connection Ranch Lake

8750 State Route 70 East

Bradenton, FL 34202

8466 Lockwood Ridge Rd #157, Sarasota, FL 34243

941.809.2231

email: exd@rootedcommunities.org

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ROOTED COMMUNITIES INC

Personal Profile Intake Form

Applicant Information (Revised 06/20/2025) **Please Print Clearly**

Name: (Last, First, MI)			
Street Address:			
City, State, Zip Code:			
Do you live in?	City _____	County _____	
Telephone: (Home)	(Cell)	(Work)	
Social Security No:		Date of Birth:	
E-Mail Address: (optional)			
Gender: (please circle)	Male	Female	
Marital Status: (please circle)	Single	Married	Divorced
	Widow(er)	Separated	
Ethnicity: (please circle Yes or No for Hispanic Origin)	Yes	No	
Race: (please circle)	White	Black or African American	Asian
	Race/Other	Mixed	
If mixed race or other: please identify.			
Do you have a disability? (please circle)	Yes	No	
Are you a U.S. Veteran? (please circle)	Yes	No	
Current Living Arrangement: (please circle)	Rent	Homeless/Living in shelter	
	Living with family member/roommate	Homeowner with Mortgage	
	Homeowner with mortgage paid off	Other	
If other, please identify.			
Are you a first-time buyer?	Yes	No	
Household Type: (please select the most accurate)	Female-headed single parent	Male-headed single parent	Single adult
	Two or more unrelated adults	Married with children	Married without children
Other: If other: please identify			
Family size: How many dependents? _____ Ages?			
<hr/>			
Are their non-dependents who will be living in the home?	Yes	No	
If yes, please list relationship and age.			
Child Support? _____	SSI/SSD? _____	Alimony? _____	
Education: (please circle)	Below high school diploma	High school diploma or equivalent	Two-year college
	Master's Degree	Above Master's Degree	Bachelor's Degree
Referred to Home Ownership Center by: (please circle all that apply)			
Advertisement	Bank	Government	Staff/board member
Radio/TV	Walk-in	Friend	
If you were referred by a bank, which one:			

ROOTED COMMUNITIES INC

Applicant Employment – Last 2 years **Please Print Clearly**

Primary Employer:		
Street Address:		
City, State, Zip:		
Telephone:	Hire Date:	
Employment Status: (please circle)	Full-time	Part-time
If part-time, number of hours per week:		
Gross Income (before taxes): \$		
Is this amount paid: (please circle one) hourly weekly every two weeks twice a month monthly		

Household Income **Please Print Clearly**

Type of Income	Applicant Monthly Amount	Co-Applicant Monthly Amount
Salary/Wages		
Alimony/Child Support		
Pension Income		
Social Security Retirement Benefits		
Public Assistance		
Self-Employment		
Dependent SSI Income		
Social Security Disability Benefits		
Other: (please identify)		
Can you document court-ordered child support and/or alimony income? Yes No If yes, how long will it continue?		
If your child or a family member receives SSI, for how many more years will the payments continue?		
If you receive disability income, is it for a permanent disability? Yes No		

Annual Income from all sources: Please circle amount based on family size:

FY 2025 Income Limit <small>(Revised 06/20/25)</small>	1 Person	2 Person	3 Person	4 Person	5 Person	6 Person	7 Person	8 Person
VL (50 – 79%)	\$37,700	\$43,050	\$48,450	\$53,800	\$58,150	\$62,450	\$66,750	\$71,050
L (80%)	\$60,300	\$68,900	\$77,500	\$86,100	\$93,000	\$99,900	\$106,800	\$113,700
M (80 – 140%)	\$105,560	\$120,540	\$135,660	\$150,640	\$162,820	\$174,860	\$186,900	\$198,940

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Liabilities/Debt

Please Print Clearly

Please list any debts you have, including credit cards, auto loans, student loans, and child-care expenses. **DO NOT include rent or utilities.**

Paid To	Current Balance	Monthly Payment	Who's Debt? A = Applicant C = Co-Applicant N = Both
1.			
2.			
3.			
4.			
5.			
Have your payments been made on time?			Yes No
Are you currently in Chapter 13 bankruptcy? (Repayment)			Yes No
If yes, when did it begin? _____			
If yes, when will it be paid out? _____			
If yes, how much are the monthly payments? _____			
Have you had a Chapter 7 bankruptcy? (Dissolution)			Yes No
If yes, when was it discharged? _____			

Liquid Funds/Savings/Investments

Please Print Clearly

Please list the approximate value of each	Applicant	Co-Applicant
Checking account – Bank:		
Savings account – Bank:		
Cash on hand		
Certificates of Deposits (CD's)		
Securities (stocks, bonds, etc.)		
Retirement accounts (IRA's/401(k)/Pension		
Can you document 12 months of rental history? (cancelled checks, money orders, cash receipt from landlord?)		
Yes No		

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Living Expenses Please Print Clearly

Description	Applicant	Co-Applicant
Current monthly rent or mortgage		
Electric		
Water/Solid Waste		
Telephone		
Cable/Satellite TV		
Food		
Gas		
Auto Insurance		
Day Care/After School		
Other		

Additional Information Please Print Clearly

<i>Have you attended a First-time Home Buyer's Education Class?</i>	Yes	No
<i>Do you have a contract on a house at this time?</i>	Yes	No
<i>Are you currently working with a real estate agent?</i>	Yes	No

Other Information you feel is relevant to your situation:

Authorization to Release Information

I/We hereby authorize Rooted Communities Inc. to obtain a credit report (for a fee) and all necessary information (job, rent, financial, etc.) to assist me/us in an evaluation of my/our capacity to successfully accomplish homeownership. I/We understand that the information may be shared with other housing counselors and lenders in an effort to determine eligibility for mortgage financing and/or develop a plan to correct qualification deficiencies in the pursuit of a mortgage approval.

I/We hereby acknowledge the above information to be true and accurate to the best of my/our knowledge. Rooted Communities Inc. contracts with Sarasota County, Manatee County and the U. S. Department of Housing and Urban Development to provide services to potential homebuyers. I/We agree that Rooted Communities Inc. may release information to the property city/county/state/federal officials, in compliance with the contract and down payment assistance programs.

Applicant Signature

Date

Co-Applicant Signature

Date

ROOTED COMMUNITIES INC

Co-Applicant Please Print Clearly

Name: (Last, First, MI)				
Street Address:				
City, State, Zip Code:				
Telephone: (Home)		(Cell)	(Work)	
Social Security No:			Date of Birth:	
E-Mail Address: (optional)				
Gender: (please circle)		Male	Female	
Marital Status: (please circle) Single Married Divorced Separated Widow(er)				
Ethnicity: (please circle Yes or No for Hispanic Origin)			Yes	No
Race: (please circle) White Black or African American Asian Mixed Race/Other If mixed race or other: please identify.				
Do you have a disability? (please circle)			Yes	No
Are you a U.S. Veteran? (please circle)			Yes	No
Relationship to Applicant? (please circle) Spouse Daughter Son Father Brother Girlfriend Boyfriend Mother Sister Other If other, please identify.				
Education: (please circle) Below high school diploma High school diploma or equivalent Two-year college Bachelor's Degree Master's Degree Above Master's Degree				

Co-Applicant Employment – Last 2 years Please Print Clearly

Primary Employer:				
Street Address:				
City, State, Zip:				
Telephone:		Hire Date:		
Employment Status: (please circle)		Full-time	Part-time	
If part-time, number of hours per week:				
Gross Income (before taxes): \$				
Is this amount paid: (please circle one) hourly weekly every two weeks twice a month monthly				



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Disclosure Statement

Rooted Communities Inc. offers one-on-one housing counseling provided by Certified HUD Housing Counselor. One-on-one counseling includes a review of credit report, budgeting/savings plan, mortgage/realtor preparation, down payment assistance programs, identification of predatory lending, fair housing, energy conservation, home maintenance and closing on a home. The only charge for this service is \$47.50 per person for a tri-merged credit report.

Rooted Communities Inc. also teaches the 8-hour HUD Approved Home Buyer Workshop. This class is taught by a HUD Certified Housing Counselor. Presently there is no charge for our Home Buyer Education Class.

Rooted Communities Inc. is a not-for-profit developer and builder of affordable housing serving those individuals / families up to 80% of AMI (area median income) utilizing federal HOME funding.

I, _____ and _____

understand and consent to the fact that I am under no obligation to purchase a home through Rooted Communities Inc. If I qualify under the income guidelines for Rooted Communities Inc., I understand that I have the choice to participate in the program or pursue another program outside of Rooted Communities Inc. I also understand that no matter which program I choose to participate in, I will be able to continue my working relationship and obtain assistance from Rooted Communities Inc. I also have the right to choose the lender, realtor, and/or any other individual providing housing services involved in my homebuying process. I understand if Rooted Communities Inc. refers me to any outside services they will give me at least three referrals.

Signature: _____
Applicant

Date

Signature: _____
Co-Applicant

Date

Rooted Communities Inc. representative:

Signature: *Laura Carter*

Date



ROOTED COMMUNITIES

Authorization for Release of Credit/Financial Information

Name: _____

Name: _____

SS#: _____

SS#: _____

DOB: _____

DOB: _____

I/We the undersigned is a customer of Rooted Communities Inc. and requests/authorize that any and all information currently on file with your agency/financial institution/medical facility/ be released to the representative of Rooted Communities Inc.

I/We agree to hold Rooted Communities Inc. harmless from any liability for any claims or actions which may occur as a result of the release of this information.

Signature: _____

Signature: _____

Date: _____

Date: _____

Rooted Communities Inc. representative:

Signature: *Laura Carter*

Date: _____

Revised: 03/06/25

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