

Oklahoma Community



Land Consortium

Application Packet

Required Documents

Below are the required items you will need to apply to purchase a CLT home. If any of the items are not included, your application may be denied.

**CLT and NHS staff reserve the right to request additional information to determine the final approval of your application.*

- OKCLC Home Specific Application Income

- Documentation
 - 2 months of most recent bank statements
 - 2 months of most recent utility bills
 - 3 months of most recent proof of income
Examples – paystubs, award letters, child support, social security, disability, unemployment, financial aid, gift letter
 - Tax Returns from previous 2 years
 - W-2's from all jobs held in the last year

- Pre-Approval Letter** (not required for sellers)

- Completion Certificate for Intro to Homeownership Class
Due before the final closing - if available, can be submitted with the application

** - Interested buyers must be able to qualify for a 30-year conventional mortgage with a CLT-compatible mortgage partner. The CLT is currently unable to work with FHA or VA financing.

Please note, not all lenders work with CLT's and to form a new partnership with a lender not on the list could take more than 12 months. Buyers wishing to work with a lender who is NOT on the partner list should send their lender the included Lender Guide Document.

Submitting Application + Required Documents

- Applications are home-specific and can be accessed in the following ways:
 - Downloaded directly from our website
Applications will be listed under the individual homes and on all Home Specific Flyers
 - Downloaded through the Application Submission Page
select the home you want to apply for and links to the application will be listed
 - Hardcopies + the Required Document Checklists can be picked at the NHSOKLA Offices - 4101 N Classen Blvd Ste A, Oklahoma City, OK 73118

- Once you have completed the application form and gathered all other required documents, you can submit them in the following ways:
 - Through the Application Submission Page
 - Dropped off at the NHSOKLA Offices - 4101 N Classen Blvd Ste A, Oklahoma City, OK 73118

Be aware that the online submission page will ONLY accept PDFs. The application form can be completely filled out online, downloaded, and then uploaded to the submission page. Scans of the document can also be uploaded. If you need assistance, please contact info@nhsokla.org.

You will also be unable to submit the application once you have uploaded ALL the required documents. If you do not have the items, it will not let you move forward or submit the application. If you need assistance, please contact info@nhsokla.org

Household Income Guidelines for Buyers

The home you are interested in purchasing will be sold to an income-qualifying household with a combined annual household income under 80% AMI. If your combined household income exceeds the amount listed in the table below (for your household's size), you DO NOT qualify for this home.

Household Size	1	2	3	4	5	6	7	8
80% AMI <i>Max Annual Income</i>	\$50,150	\$57,300	\$64,450	\$71,600	\$77,350	\$83,100	\$88,800	\$95,550
<i>Max Monthly Income</i>	\$4,179	\$4,775	\$5,370	\$5,966	\$6,445	\$6,925	\$7,400	\$7,879

Income limits are based on the gross income of all adults who will be living in the household at the time of purchase, regardless of whether or not they will be on the mortgage.

All income is counted, including regular employment wages, plus child support, alimony, social security, and disability benefits.

Buyers only have to income qualify at the time of original purchase. Their income is never monitored again, and there is no limit on how much they can earn in the future.

HOUSEHOLDS MUST ALSO:

- **Be a first-time homebuyer**
- **Monthly housing costs - mortgage payments, taxes, insurance, and membership fees -cannot exceed 35% of the household's monthly income***
- **Total housing costs + existing debt cannot exceed 43%***
- **Have under \$35,000 cash assets**
- **Have verified funds to close**

* NOTES ABOUT DEBT RATIOS:

These ratios or percentages of monthly income limits may change if the buyer is using a city or state-funded down payment assistance program or if they qualify for a specific mortgage through their lender. The CLT and OKCLC staff always assist households in navigating these requirements.

If your monthly housing costs EXCEED 35% of your monthly income or if your housing costs plus your current debt EXCEEDS 43% of your monthly income, you DO NOT qualify for this home.



OK Community Land Consortium

(405) 231 - 4663 | OKCLC.ORG

4101 N Classen Blvd Ste. A, Oklahoma City, OK 73118

Equitable Opportunity | Affordable Homes | Thriving Neighborhoods



Education and Housing Counseling Participant Profile

First Name	Middle Name	Last Name
Address		City
State	Zip Code	County
Email Address		Phone Number

- Date of Birth: _____ (month/date/year)
- Gender (check one): Male Female Transgender Male Transgender Female
 Choose not to respond Other: _____
- Personal Pronouns: She/Her/Hers He/Him/His They/Them/Theirs Choose not to respond
- What is your preferred language? (check one): English Spanish Other: _____
- Describe your English proficiency: Proficient (not limited) Limited English Choose not to respond
- Do you live in a rural area? (check one): Yes No
- Household Type (check one):

<input type="checkbox"/> Single Adult	<input type="checkbox"/> Married With Children
<input type="checkbox"/> Female-Headed Single Parent	<input type="checkbox"/> Two or More Unrelated Adults
<input type="checkbox"/> Male-Headed Single Parent	<input type="checkbox"/> Other
<input type="checkbox"/> Married Without Children	
- Are you a veteran? (check one): Yes No
- Do you have a disability? (check one): Yes No
- Do you receive disability benefits? (check one): Yes
- How did you hear about us? (check any and all that apply)

<input type="checkbox"/> Habitat for Humanity	<input type="checkbox"/> Realtor
<input type="checkbox"/> OK Housing Finance Agency	<input type="checkbox"/> New Development
<input type="checkbox"/> Lender Referral	<input type="checkbox"/> OKC Housing Authority
<input type="checkbox"/> Urban League	<input type="checkbox"/> Online/Website
<input type="checkbox"/> Community Action Agency	<input type="checkbox"/> Family/Friend
<input type="checkbox"/> Walk-In	<input type="checkbox"/> Other: _____
<input type="checkbox"/> NHS/ OKCLC Event	
- Race (check all that apply)

<input type="checkbox"/> American Indian/Alaskan Native	<input type="checkbox"/> White
<input type="checkbox"/> Asian	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Black/African American	<input type="checkbox"/> Choose not to respond
<input type="checkbox"/> Native Hawaiian/Pacific Islander	

13. Ethnicity (check one): Hispanic or Latino Not Hispanic or Latino Choose not to respond
14. Have you experienced housing discrimination within the last 180 days? (check one): Yes No
15. Are you a Oklahoma County Resident? (Are you a permanent resident of Oklahoma?)
(check one): Yes No
16. Have you purchased a home within the last three years? (check one): Yes No
17. Total number of people in your household: _____
18. Total number of dependents: _____
19. Total Gross Monthly Income (includes wages, worker's comp, veteran benefits, unemployment, SSI, Social Security benefits, retirement, public assistance, military, child support, alimony) _____
20. Total Monthly Debt (includes MONTHLY payments of credit cards, automobile loan, mortgage, student loans, child support, alimony) _____
21. When was the last time you got a copy of your credit report and/or score? Date: _____
22. Credit Scores:
 Transunion _____ Experian _____
 Equifax _____ I don't know
23. Do you currently use any third-party businesses to track your score? Check all that apply.
 AnnualCreditReport.com Quizzle
 Credit Karma Other _____
 Credit Sesame
24. Do you plan to purchase a home in the next... (check anticipated time frame)
 30 Days 1 Year
 3 Months Longer than 1 year
 6 Months
25. Do you currently follow a written or electronic budget? (check one): Yes No
26. Do you have money set aside in the event of an emergency? (check one): Yes No
 If yes, how much? _____
27. Do you have a checking account? (check one): Yes No
28. Do you have a savings account? (check one): Yes No
29. Would you like help with any of the following: (check all that apply)
 Establish a plan to maintain or improve your credit score Begin a savings plan
 Establish a plan to increase your emergency funds Reduce debt
 Review your credit score
 Become mortgage eligible
30. Are you a current NHSOKLA/ Commons Property Management tenant? (check one): Yes No

Printed Name

Signature

Date

Updated 11/7/2022



Education and Housing Counseling Participant Profile

This Second Profile is for the Co-Signer (if applicable)

First Name	Middle Name	Last Name
Address		City
State	Zip Code	County
Email Address		Phone Number

- Date of Birth: _____ (month/date/year)
- Gender (check one): Male Female Transgender Male Transgender Female
 Choose not to respond Other: _____
- Personal Pronouns: She/Her/Hers He/Him/His They/Them/Theirs Choose not to respond
- What is your preferred language? (check one): English Spanish Other: _____
- Describe your English proficiency: Proficient (not limited) Limited English Choose not to respond
- Do you live in a rural area? (check one): Yes No
- Household Type (check one):

<input type="checkbox"/> Single Adult	<input type="checkbox"/> Married With Children
<input type="checkbox"/> Female-Headed Single Parent	<input type="checkbox"/> Two or More Unrelated Adults
<input type="checkbox"/> Male-Headed Single Parent	<input type="checkbox"/> Other
<input type="checkbox"/> Married Without Children	
- Are you a veteran? (check one): Yes No
- Do you have a disability? (check one): Yes No
- Do you receive disability benefits? (check one): Yes No
- How did you hear about us? (check any and all that apply)

<input type="checkbox"/> Habitat for Humanity	<input type="checkbox"/> Realtor
<input type="checkbox"/> OK Housing Finance Agency	<input type="checkbox"/> New Development
<input type="checkbox"/> Lender Referral	<input type="checkbox"/> OKC Housing Authority
<input type="checkbox"/> Urban League	<input type="checkbox"/> Online/Website
<input type="checkbox"/> Community Action Agency	<input type="checkbox"/> Family/Friend
<input type="checkbox"/> Walk-In	<input type="checkbox"/> Other: _____
<input type="checkbox"/> NHS/ OKCLC Event	
- Race (check all that apply)

<input type="checkbox"/> American Indian/Alaskan Native	<input type="checkbox"/> White
<input type="checkbox"/> Asian	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Black/African American	<input type="checkbox"/> Choose not to respond
<input type="checkbox"/> Native Hawaiian/Pacific Islander	

13. Ethnicity (check one): Hispanic or Latino Not Hispanic or Latino Choose not to respond
14. Have you experienced housing discrimination within the last 180 days? (check one): Yes No
15. Are you a Oklahoma County Resident? (Are you a permanent resident of Oklahoma?)
(check one): Yes No
16. Have you purchased a home within the last three years? (check one): Yes No
17. Total number of people in your household: _____
18. Total number of dependents: _____
19. Total Gross Monthly Income (includes wages, worker's comp, veteran benefits, unemployment, SSI, Social Security benefits, retirement, public assistance, military, child support, alimony) _____
20. Total Monthly Debt (includes MONTHLY payments of credit cards, automobile loan, mortgage, student loans, child support, alimony) _____
21. When was the last time you got a copy of your credit report and/or score? Date: _____
22. Credit Scores:
- | | |
|---|---|
| <input type="checkbox"/> Transunion _____ | <input type="checkbox"/> Experian _____ |
| <input type="checkbox"/> Equifax _____ | <input type="checkbox"/> I don't know |
23. Do you currently use any third-party businesses to track your score? Check all that apply.
- | | |
|---|--------------------------------------|
| <input type="checkbox"/> AnnualCreditReport.com | <input type="checkbox"/> Quizzle |
| <input type="checkbox"/> Credit Karma | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Credit Sesame | |
24. Do you plan to purchase a home in the next... (check anticipated time frame)
- | | |
|-----------------------------------|---|
| <input type="checkbox"/> 30 Days | <input type="checkbox"/> 1 Year |
| <input type="checkbox"/> 3 Months | <input type="checkbox"/> Longer than 1 year |
| <input type="checkbox"/> 6 Months | |
25. Do you currently follow a written or electronic budget? (check one): Yes No
26. Do you have money set aside in the event of an emergency? (check one): Yes No
If yes, how much? _____
27. Do you have a checking account? (check one): Yes No
28. Do you have a savings account? (check one): Yes No
29. Would you like help with any of the following: (check all that apply)
- | | |
|--|---|
| <input type="checkbox"/> Establish a plan to maintain or improve your credit score | <input type="checkbox"/> Begin a savings plan |
| <input type="checkbox"/> Establish a plan to increase your emergency funds | <input type="checkbox"/> Reduce debt |
| | <input type="checkbox"/> Review your credit score |
| | <input type="checkbox"/> Become mortgage eligible |
30. Are you a current NHS/ Commons Property Management tenant? (check one): Yes No

Printed Name (Co-Borrower)

Signature (Co-Borrower)

Date

Updated 11/7/2022



Housing Education Program Agreement and Release of Information

In signing this agreement and release, I/We agree to actively participate in the Housing Education Services being offered by this agency. I/We understand:

1. A referral to other services of the organization or another agency (as appropriate) may be made to assist with particular concerns that have been identified. I understand that I am not obligated to use any of the services offered to me.
2. That this agency receives funds through NWA, OHFA and HUD and as such, is required to share some of my personal information with program administrators or their agents for purposes of program monitoring, compliance and evaluation.
3. That a counselor may answer questions and provide information but cannot give legal advice. If I want legal advice, I will be referred to an attorney for appropriate assistance.
4. That this agency may provide information on numerous housing programs and loan products and I further understand that the housing services received from this agency in no way obligates me/us to choose any of their particular housing programs or loan products.

For Pre-Purchase Education Services only:

_____ By initialing I/We acknowledge the agency has provided me/us with (1) **For Your Protection Get a Home Inspection** (HUD-92564), (2) **Ten Important Questions to Ask a Home Inspector**, and (3) **Disclosure of Lead-Based Paint Hazards in Housing** (EPA-747-F-96-002)

For Post-Purchase Education Services only:

I/We hereby allow this Agency its agents, employees, or affiliates to request and obtain income and asset information, mortgage, credit bureau and personal information pertinent to the housing counseling received. I/We allow contact to be made on my/our behalf with representatives from mortgage, attorney, collection and credit bureau companies.

CONSENT: Failure to sign this consent form may result in denial of program assistance or termination of counseling program benefits.

Client's Printed Name:	Client's Signature:	Date Signed:
Client #2 Printed Name:	Client #2 Signature:	Date Signed:
Client's Current Address:	City:	Zip Code:

To be completed by Counselor:

Agency Name OK Community Land Consortium	Agency Phone Number: 405-231-4663	
Counselor Name:	Counselor Signature:	Date Signed:





Data Release Form & Third Party Authorization

If you have an impairment, disability, language barrier, or otherwise require an alternative means of completing this form or accessing information about housing counseling, please talk to your housing counselor about arranging alternative accommodations.

You hereby authorize and instruct OK Community Land Consortium and/or its assigned agents to:

- Obtain and review your credit report, and
- Request verifications of your income, assets, and any other information deemed necessary for improving your housing situation.

Your credit report will be obtained from a credit reporting agency chosen by OK Community Land Consortium. You understand and agree that OK Community Land Consortium intends to use the credit report for the purpose of evaluating your financial readiness to purchase or rent a home and/or to engage in post-purchase counseling activities. You hereby authorize OK Community Land Consortium, when necessary, to share your credit report and any information that you provided (including any computations and assessments produced) with the entities listed below in order to help OK Community Land Consortium determine your viable financial options.

Lenders	Debt Collectors	Property Management Companies
Banks	Landlords	Social Service Agencies
Mortgage Servicers	Public Housing Authorities	Counseling Agencies

Entities such as mortgage lenders and/or counseling agencies may contact your OK Community Land Consortium/NHS counselor to evaluate the options for which you may be eligible. In connection with such evaluation, you authorize the credit reporting and/or financial agencies to release information and cooperate with your OK Community Land Consortium/NHS counselor. No information will be discussed about you with entities not directly involved in your efforts to improve your housing situation. Only information pertinent to the inquiry at hand will be shared.

You hereby authorize the release of your information to program monitoring organizations of OK Community Land Consortium including but not limited to, Federal, State, and nonprofit partners for program review, monitoring, auditing, research, and/or oversight purposes. You also agree to keep OK Community Land Consortium informed of any changes in address, telephone number, job status, marital status, or other conditions which may affect your eligibility for a program you have applied for or a counseling service that you are seeking.

Finally, you understand that you may revoke consent to these disclosures by notifying OK Community Land Consortium in writing.

_____	_____	_____	_____	_____
Name 1 (Printed)	SSN#	Date of Birth	Signature	Today's Date

_____	_____	_____	_____	_____
Name 2 (Printed)	SSN#	Date of Birth	Signature	Today's Date

Current Address: _____

Previous Address: _____
(Required if you reside at current address less than 2 years)

Verified Client Identification and SSN: _____	_____
	Counselor Signature
	Date





Counselor and Client Agreement

OK Community Land Consortium and its counselor(s) agree to provide professional housing counseling services to _____ (you).

WHAT TO EXPECT

The counselor will help you:

- Understand the relevant housing processes so that you know what to expect and what to do next;
- Explore options available to you in regards to your own housing goals.
- Counselors are not able to guarantee certain outcomes, but are committed to working with you so you can make the best decisions possible to meet your housing goals.

The counselor will work with you to understand:

- Your current credit information by reviewing your credit report;
- Your income and expenses by developing a spending plan;
- Possible solutions and adjustments to your spending plan, as needed;
- Current mortgage products and options available to you;
- Referral options as needed.

Together with the counselor you will develop an action plan with steps for both you and the counselor.

COUNSELOR COMMITMENT

The counselor agrees to:

- Provide you with factual information;
- Complete action plan steps in a timely manner;
- Make referrals to needed resources;
- Provide services confidentially, honestly and respectfully;
- Communicate with involved parties (ex. Housing commissions or Mortgage Company).

CLIENT COMMITMENT

You understand that in order for the counselor to provide you with the best service possible, you agree to:

- Provide honest and complete information;
- Provide all necessary documentation and complete action plan steps within the timeframe requested;
- Notify the counselor immediately, preferably 6 hours before a scheduled appointment, if you will be unable to attend an appointment;
- Arrive on time for appointments. You understand that if you are late for an appointment, the appointment will still end at the scheduled time and the counselor may need to reschedule;
- Contact the counselor about any changes in your situation immediately;
- Complete required classes, counseling, and workshops needed to succeed.

Client Printed Name

Client Signature

Date Signed

Co-Borrower Printed Name (If applicable)

Co-Borrower Signature

Date Signed

Counselor Printed Name

Counselor Signature

Date Signed

PLEASE SEE PAGE TWO OF THIS DOCUMENT

Updated 6/10/2022

PRIVACY POLICY

OK Community Land Consortium follows HUD and federal guidelines in regards to protecting your privacy and protecting your Personally Identifiable Information (PII). We are committed to protecting the privacy of your information whether it is stored electronically, in client management software or in paper form. Our Counselors follow federal privacy related guidance and best practices, including, but not limited to:

Limiting Collection of PII

Your Counselor will not collect or maintain your PII without proper authorization and only collect that which is needed for the purpose of Housing Counseling and Education Services.

Managing Access to Sensitive PII

- Your Counselor will only share or discuss your sensitive PII with those who have a need to know for counseling services purposes.
- Your Counselor will not distribute or release your sensitive PII to others without an authorized release.
- Before discussing your sensitive PII over the telephone, your counselor will confirm that they are speaking to the right person. They will not leave voicemails that contain your sensitive PII.
- Your Counselor will avoid discussing your sensitive PII if there are unauthorized persons in public spaces, and will hold meetings in private spaces when your individual information may be discussed.
- Your Counselor will treat notes from meetings discussing your data as confidential and insure they are stored securely.

Securing Sensitive PII

- Your file will remain in a locked filing cabinet when the Housing and Family Services department is not staffed.
- The Housing and Family Services office space will remain secure when staff is not present.
- Only program staff and their supervisors will have keys to filing cabinets containing your PII. When your file is in use, staff will take all reasonable measures to secure your information.
- Your file will be stored for a period consistent with grant and contact terms.
- Any of your documents containing personal information that is no longer needed will be destroyed via professional shredding services.
- Any of your electronic data will be stored only in a secured area on the network or in the appropriate client management databases.
- All databases will be secured with individual passwords for program staff and their supervisors, and Staff will password-protect their computers when they step away from their workspaces.



For Your Protection: Get a Home Inspection

You must make a choice on getting a Home Inspection. It is not done automatically.

You have the right to examine carefully your potential new home with a professional home inspector. But a home inspection is not required by law, and will occur only if you ask for one and make the arrangements. You may schedule the inspection for before or after signing your contract. You may be able to negotiate with the seller to make the contract contingent on the results of the inspection. For this reason, it is usually in your best interest to conduct your home inspection as soon as possible if you want one. In a home inspection, a professional home inspector takes an in-depth, unbiased look at your potential new home to:

- Evaluate the physical condition: structure, construction, and mechanical systems;**
- Identify items that need to be repaired and**
- Estimate the remaining useful life of the major systems, equipment, structure, and finishes.**

The Appraisal is NOT a Home Inspection and does not replace an inspection.

An appraisal estimates the market value of the home to protect the lender. An appraisal does not examine or evaluate the condition of the home to protect the homebuyer. An appraisal only makes sure that that the home meets FHA and/or your lender's minimum property standards. A home inspection provides much more detail.

FHA and Lenders may not Guarantee the Condition of your Potential New Home

If you find problems with your new home after closing, neither FHA nor your lender may give or lend you money for repairs. Additionally, neither FHA nor your lender may buy the home back from you. Ask a qualified home inspector to inspect your potential new home and give you the information you need to make a wise decision.

Your Home Inspector may test for Radon, Health/Safety, and Energy Efficiency

EPA, HUD and DOE recommend that houses be tested and inspected for radon, health and safety, and energy efficiency, respectively. Specific tests are available to you. You may ask about tests with your home inspector, in addition to the structural and mechanical systems inspection. For more information: Radon – call 1-800-SOS-Radon; Health and Safety – see the HUD Healthy Homes Program at www.HUD.gov; Energy Efficiency – see the DOE EnergyStar Program at www.energystar.gov.

Selecting a Trained Professional Home Inspector

Seek referrals from friends, neighbors, other buyers, realtors, as well as local listings from licensing authorities and local advertisements. In addition, consult the American Society of Home Inspectors (ASHI) on the web at: www.ashi.org or by telephone at: 1-800-743-2744.

I / We (circle one) have read this document and understand that if I/we wish to get a home inspection, it is best do so as soon as possible. The appraisal is not a home inspection. I/we will make a voluntary choice whether to get a home inspection. A home inspection will be done only if I/we ask for one and schedule it. Your lender may not perform a home inspection and neither FHA nor your lender may guarantee the condition of the home. Health and safety tests can be included in the home inspection if I/we choose.

_____/_____/_____
(Signed) Homebuyer

_____/_____/_____
Date

_____/_____/_____
(Signed) Homebuyer

_____/_____/_____
Date

Public reporting burden for this collection is estimated at an average of 30 minutes to review the instructions, find the information, and complete this form. This agency cannot conduct or sponsor a collection of information unless a valid OMB number is displayed. You are not required to respond to a collection of information if this number is not displayed. Valid OMB numbers can be located on the OMB Internet page at <http://www.whitehouse.gov/library/omb/OMBINVC.html> - HUD If desired you can call 1-800-827-1000 to get information on where to send comments or suggestions about this form.





Ten Important Questions to Ask Your Home Inspector

1. **What does your inspection cover?** The inspector should ensure that their inspection and inspection report will meet all applicable requirements in your state if applicable and will comply with a well-recognized standard of practice and code of ethics. You should be able to request and see a copy of these items ahead of time and ask any questions you may have. If there are any areas you want to make sure are inspected, be sure to identify them upfront.
2. **How long have you been practicing in the home inspection profession and how many inspections have you completed?** The inspector should be able to provide his or her history in the profession and perhaps even a few names as referrals. Newer inspectors can be very qualified, and many work with a partner or have access to more experienced inspectors to assist them in the inspection.
3. **Are you specifically experienced in residential inspection?** Related experience in construction or engineering is helpful but is no substitute for training and experience in the unique discipline of home inspection. If the inspection is for a commercial property, then this should be asked about as well.
4. **Do you offer to do repairs or improvements based on the inspection?** Some inspector associations and state regulations allow the inspector to perform repair work on problems uncovered in the inspection. Other associations and regulations strictly forbid this as a conflict of interest.
5. **How long will the inspection take?** The average on-site inspection time for a single inspector is two to three hours for a typical single-family house; anything significantly less may not be enough time to perform a thorough inspection. Additional inspectors may be brought in for very large properties and buildings.
6. **How much will it cost?** Costs vary dramatically, depending on the region, size and age of the house, scope of services and other factors. A typical range might be \$300-\$500 but consider the value of the home inspection in terms of the investment being made. Cost does not necessarily reflect quality. HUD does not regulate home inspection fees.
7. **What type of inspection report do you provide and how long will it take to receive the report?** Ask to see samples and determine whether or not you can understand the inspector's reporting style and if the time parameters fulfill your needs. Most inspectors provide their full report within 24 hours of the inspection.
8. **Will I be able to attend the inspection?** This is a valuable educational opportunity, and an inspector's refusal to allow this should raise a red flag. Never pass up this opportunity to see your prospective home through the eyes of an expert.
9. **Do you maintain membership in a professional home inspector association?** There are many state and national associations for home inspectors. Request to see their membership ID and perform whatever due diligence you deem appropriate.
10. **Do you participate in continuing education programs to keep your expertise up to date?** One can never know it all, and the inspector's commitment to continuing education is a good measure of his or her professionalism and service to the consumer. This is especially important in cases where the home is much older or includes unique elements requiring additional or updated training.



FACT SHEET

EPA and HUD Move to Protect Children from Lead-Based Paint Poisoning; Disclosure of Lead-Based Paint Hazards in Housing

SUMMARY

The Environmental Protection Agency (EPA) and the Department of Housing and Urban Development (HUD) are announcing efforts to ensure that the public receives the information necessary to prevent lead poisoning in homes that may contain lead-based paint hazards. Beginning this fall, most home buyers and renters will receive known information on lead-based paint and lead-based paint hazards during sales and rentals of housing built before 1978. Buyers and renters will receive specific information on lead-based paint in the housing as well as a Federal pamphlet with practical, low-cost tips on identifying and controlling lead-based paint hazards. Sellers, landlords, and their agents will be responsible for providing this information to the buyer or renter before sale or lease.

LEAD-BASED PAINT IN HOUSING

Approximately three-quarters of the nation's housing stock built before 1978 (approximately 64 million dwellings) contains some lead-based paint. When properly maintained and managed, this paint poses little risk. However, 1.7 million children have blood-lead levels above safe limits, mostly due to exposure to lead-based paint hazards.

EFFECTS OF LEAD POISONING

Lead poisoning can cause permanent damage to the brain and many other organs and causes reduced intelligence and behavioral problems. Lead can also cause abnormal fetal development in pregnant women.

BACKGROUND

To protect families from exposure to lead from paint, dust, and soil, Congress passed the Residential Lead-Based Paint Hazard Reduction Act of 1992, also

known as Title X. Section 1018 of this law directed HUD and EPA to require the disclosure of known information on lead-based paint and lead-based paint hazards before the sale or lease of most housing built before 1978.

WHAT IS REQUIRED

Before ratification of a contract for housing sale or lease:

- Sellers and landlords must disclose known lead-based paint and lead-based paint hazards and provide available reports to buyers or renters.
- Sellers and landlords must give buyers and renters the pamphlet, developed by EPA, HUD, and the Consumer Product Safety Commission (CPSC), titled *Protect Your Family from Lead in Your Home*.
- Home buyers will get a 10-day period to conduct a lead-based paint inspection or risk assessment at their own expense. The rule gives the two parties flexibility to negotiate key terms of the evaluation.
- Sales contracts and leasing agreements must include certain notification and disclosure language.
- Sellers, lessors, and real estate agents share responsibility for ensuring compliance.



WHAT IS NOT REQUIRED

- This rule does not require any testing or removal of lead-based paint by sellers or landlords.
- This rule does not invalidate leasing and sales contracts.

TYPE OF HOUSING COVERED

Most private housing, public housing, Federally owned housing, and housing receiving Federal assistance are affected by this rule.

TYPE OF HOUSING NOT COVERED

- Housing built after 1977 (Congress chose not to cover post-1977 housing because the CPSC banned the use of lead-based paint for residential use in 1978).
- Zero-bedroom units, such as efficiencies, lofts, and dormitories.
- Leases for less than 100 days, such as vacation houses or short-term rentals.
- Housing for the elderly (unless children live there).
- Housing for the handicapped (unless children live there).

- Rental housing that has been inspected by a certified inspector and found to be free of lead-based paint.
- Foreclosure sales.

EFFECTIVE DATES

- For owners of more than 4 dwelling units, the effective date is September 6, 1996.
- For owners of 4 or fewer dwelling units, the effective date is December 6, 1996.

THOSE AFFECTED

The rule will help inform about 9 million renters and 3 million home buyers each year. The estimated cost associated with learning about the requirements, obtaining the pamphlet and other materials, and conducting disclosure activities is about \$6 per transaction.

EFFECT ON STATES AND LOCAL GOVERNMENTS

This rule should not impose additional burdens on states since it is a Federally administered and enforced requirement. Some state laws and regulations require the disclosure of lead hazards in housing. The Federal regulations will act as a complement to existing state requirements.

FOR MORE INFORMATION

- For a copy of *Protect Your Family from Lead in Your Home* (in English or Spanish), the sample disclosure forms, or the rule, call the National Lead Information Clearinghouse (NLIC) at (800) 424-LEAD, or TDD (800) 526-5456 for the hearing impaired. You may also send your request by fax to (202) 659-1192 or by Internet E-mail to ehc@cais.com. Visit the NLIC on the Internet at <http://www.nsc.org/nsc/ehc/ehc.html>.
- Bulk copies of the pamphlet are available from the Government Printing Office (GPO) at (202) 512-1800. Refer to the complete title or GPO stock number 055-000-00507-9. The price is \$26.00 for a pack of 50 copies. Alternatively, persons may reproduce the pamphlet, for use or distribution, if the text and graphics are reproduced in full. Camera-ready copies of the pamphlet are available from the National Lead Information Clearinghouse.
- For specific questions about lead-based paint and lead-based paint hazards, call the National Lead Information Clearinghouse at (800) 424-LEAD, or TDD (800) 526-5456 for the hearing impaired.
- The EPA pamphlet and rule are available electronically and may be accessed through the Internet.

Electronic Access:

Gopher: gopher.epa.gov:70/11/Offices/PestPreventToxic/Toxic/lead_pm

WWW: <http://www.epa.gov/opptintr/lead/index.html>
<http://www.hud.gov>

Dial up: (919) 558-0335

FTP: <ftp.epa.gov> (To login, type "anonymous." Your password is your Internet E-mail address.)



U.S. Department of Housing and Urban Development • Office of Healthy Homes and Lead Hazard Control



HEALTHY HOMES
Healthy Families | Healthy Children

RADON

"You can't see radon. But it may be a problem in your home"

U.S. Environmental Protection Agency

Did you know...?

- Radon is the second leading cause of lung cancer, after smoking.¹
- Approximately 20,000 cancer deaths each year are caused by radon.²
- Radon is the leading cause of cancer among nonsmokers.³

What is it?

Radon is a radioactive gas that cannot be seen or smelled and is found naturally around the country. When you breathe air containing radon, cells in your airway may be damaged, increasing your risk of getting lung cancer.

Radon is found in the dirt and rocks beneath houses, in well water, and in some building materials. It can enter your house through soil, dirt floors in crawlspaces, and cracks in foundations, floors, and walls.

All houses have some radon, but houses next to each other can have very different radon levels, so the only way to determine your particular risk is to test your home. Radon is measured in "picoCuries per liter of air," abbreviated "pCi/L." This unit of measure describes the number of radon gas particles in one liter of air. The amount of radon outdoors is usually around 0.4 pCi/L, and indoors is around 1.3 pCi/L. Even though all radon exposure is unhealthy, radon at levels below 4 pCi/L are considered acceptable.

There is no known "safe" level of radon exposure. If your home has a radon level of 4 pCi/L or more, you should take action to lower this level.

continued on back

www.hud.gov/healthyhomes



U.S. Department of Housing and
Urban Development
Office of Healthy Homes and Lead
Hazard Control



RADON

What can you do?

Test your Home!

About 1 out of every 15 homes has a radon problem. The only way to know for sure is to test your home. You can buy a radon test at a hardware store or order it by mail. There are two types of tests: short-term tests take 2 to 90 days, while long-term tests take more than 90 days but provide a better estimate of your annual average radon level.

In real estate transactions, short-term tests are more common because of the time limitations. (Consult EPA's Home Buyer's and Seller's Guide for more on radon testing in real estate transactions.)

Follow all the instructions that come with your test kit.

If possible during the test, keep your windows closed to keep air from escaping. Place your test kit in a room on the lowest level of your home that you use regularly, probably on the first floor or in the basement. When the test is done, send it to a lab to process your results.

You can also hire a professional tester to do the test for you. Contact your state's radon office for a list of qualified testers. (www.epa.gov/iaq/wherelive.html)

Other helpful steps:

1. **Stop smoking** and discourage smoking in your home. Smoking significantly increases the risk of lung cancer from radon.
2. **Increase air flow in your house** by opening windows and using fans and vents to circulate air. Natural ventilation in any type of house is only a temporary strategy to reduce radon.
3. **Seal cracks in floors and walls** with plaster, caulk, or other materials designed for this purpose. Contact your state radon office for a list of qualified contractors in your area and for information on how to fix radon problems yourself. Always test again after finishing to make sure you've fixed your radon problem.
4. **Ask about radon resistant construction techniques** if you are buying a new home. It is almost always cheaper and easier to build these features into new homes than to add them later.

For more information . . .

Visit HUD's website at www.hud.gov/healthyhomes for more information about addressing health hazards in homes or to learn if HUD has a Healthy Homes program in your community.

Download a copy of "Help Yourself to A Healthy Home" for more practical steps you can take to make your home a healthy home.

More Federal Resources

US Environmental Protection Agency (EPA)
www.epa.gov/radon

Other Resources

State Radon Contacts
www.epa.gov/iag

National Radon Hotline to order radon test kits
1-800/SOS-RADON (1-800-767-7236)

National Safety Council and EPA Radon Hotline with an operator to answer questions about radon
1-800-55RADON (1-800-557-2366)

Radon Fix-it Hotline
1-800-644-6999

American Lung Association
www.lungusa.org

Radon test kits are available at hardware stores or by mail



¹U.S. Environmental Protection Agency "Indoor Air- Radon" www.epa.gov/radon August 25, 2004

²U.S. Environmental Protection Agency "Assessment of Risks from Radon in Homes" www.epa.gov/radon/risk_assessment.html August 25, 2004

³U.S. Environmental Protection Agency "Indoor Air-Radon" www.epa.gov/iaq/radon/index.html August 4, 2008



Monthly Budget

Applicant Name(s): _____

Instructions: Fill out the “Current” column with your average monthly earnings/spending. This helps the Housing Counselor get a sense of where your income and spending are currently at. To calculate the final numbers, move the Total Monthly Expenses (A) to space (F). Then Add B+C+D+E together and put that total in (G). Then subtract (F) - (G), to give you the difference, which will be either the extra money you have at the end of the month, or the amount of money you spent that you didn’t have.

Note: The “Revised” Column will be completed later with a Housing Counselor.

Monthly Income	Current	Revised
Applicant Income		
Co-Applicant Income		
Social Security/SSI/Disability		
Child Support		
Food Stamps/FIA Income		
Other		
Total Monthly Income	(A) \$ 0.00	

Fixed Expenses	Current	Revised
Housing – Rent/Mortgage		
Car Loan #1		
Car Loan #2		
Car Insurance & Registration		
Student Loan		
Loan (Other)		
Child Support		
Child Care		
Savings		
Other		
Total Fixed Expenses	(B) \$ 0.00	

Flexible Expenses	Current	Revised
Food – Groceries		
In Between Grocery Expenses		
Toiletries/Cosmetics		
Natural Gas/Propane		
Electric		
Trash Removal		
Water Bill		
Telephone		
Cell Phone		
Automobile Gas, Oil, Antifreeze		
Automobile Repair, Maintenance		
Internet		
Cable/Movies/Movie Rental/Streaming Services		
Laundry/Dry Cleaning		
Activities/Going Out		
Dinners Out		
Lunches Out		
Kids School Lunches		
Dues/Subscriptions/Phone App costs		
Medical Insurance (Not Taken Out of Paycheck)		
Continue to next page		

Flexible Expenses Continued	Current	Revised
Gym Membership		
Money Orders or Cashier's Checks		
Fees: Bank, Checking, ATM, Check Cashing, Overdraft, etc.		
Rent to Own (furniture, appliances, etc.)		
Hair Care: products, styling, salon/barber, cuts, etc.		
Nail Care: salon visits, at home materials, etc.		
Clothing		
Gambling/Casinos/Lotto		
Recreational Substance Use (ie. Cigarettes/Vape/Cigars/Marijuana/Edibles/Alcohol/etc.)		
Charity/Tithing		
Education/Tuition		
Storage Unit		
Pets		
Allowance/Children's Activities		
Other		
Total Flexible Expenses	(C) \$ 0.00	

Occasional Expenses	Current	Revised
Renters Insurance		
Medical/Dental/Vision (copays, coinsurance, RX, glasses)		
Birthdays		
Christmas/Holidays		
Vacation		
Other		
Total Occasional Expenses	(D) \$ 0.00	

Debt Reducing Expenses	Current	Revised
Credit Card #1		
Credit Card #2		
Credit Card #3		
Credit Card #4		
Credit Card #5	\$ 0.00	
Credit Card #6	\$ 0.00	
Credit Card #7	\$ 0.00	
Credit Card #8	\$ 0.00	
Credit Card #9	\$ 0.00	
Credit Card #10	\$ 0.00	
Other	\$ 0.00	
Total Debt Reducing Expenses	(E) \$ 0.00	

Final Calculations	Current	Revised
Total Monthly Income (<i>Amount from "A"</i>)	(F) \$ 0.00	
Total Monthly Expenses (<i>Add B+C+D+E</i>)	(G) \$ 0.00	
Difference - either a gain or a loss. (<i>Subtract F from G</i>)		

Printed Name	Signature	Date
Printed Name	Signature	Date

***Please Note: If you think you struggle with gambling or substance use and would like support, let us know. We can provide you with resources to help.

Request for Copy of Tax Return

(September 2024)

- ▶ **Do not sign this form unless all applicable lines have been completed.**
- ▶ **Request may be rejected if the form is incomplete or illegible.**
- ▶ **For more information about Form 4506, visit www.irs.gov/form4506.**

OMB No. 1545-0429

Department of the Treasury
Internal Revenue Service

Tip: Get faster service: Online at www.irs.gov, **Get Your Tax Record** (Get Transcript) or by calling **1-800-908-9946** for specialized assistance. We have teams available to assist. **Note:** Taxpayers may register to use [Get Transcript](#) to view, print, or download the following transcript types: **Tax Return Transcript** (shows most line items including Adjusted Gross Income (AGI) from your original Form 1040-series tax return as filed, along with any forms and schedules), **Tax Account Transcript** (shows basic data such as return type, marital status, AGI, taxable income and all payment types), **Record of Account Transcript** (combines the tax return and tax account transcripts into one complete transcript), **Wage and Income Transcript** (shows data from information returns we receive such as Forms W-2, 1099, 1098 and Form 5498), and **Verification of Non-filing Letter** (provides proof that the IRS has no record of a filed Form 1040-series tax return for the year you request).

1a Name shown on tax return. If a joint return, enter the name shown first.	1b First social security number on tax return, individual taxpayer identification number, or employer identification number (see instructions)
2a If a joint return, enter spouse's name shown on tax return.	2b Second social security number or individual taxpayer identification number if joint tax return
3 Current name, address (including apt., room, or suite no.), city, state, and ZIP code (see instructions).	
4 Previous address shown on the last return filed if different from line 3 (see instructions).	
5 If the tax return is to be mailed to a third party (such as a mortgage company), enter the third party's name, address, and telephone number.	

Caution: If the tax return is being sent to the third party, ensure that lines 5 through 7 are completed before signing. (see instructions).

6 Tax return requested. Form 1040, 1120, 941, etc. and all attachments as originally submitted to the IRS, including Form(s) W-2, schedules, or amended returns. Copies of Forms 1040, 1040A, and 1040EZ are generally available for 7 years from filing before they are destroyed by law. Other returns may be available for a longer period of time. Enter only one return number. If you need more than one type of return, you must complete another Form 4506. ▶ _____

Note: If the copies must be certified for court or administrative proceedings, check here

7 Year or period requested. Enter the ending date of the tax year or period using the mm/dd/yyyy format (see instructions).

____ / ____ / ____	____ / ____ / ____	____ / ____ / ____	____ / ____ / ____
____ / ____ / ____	____ / ____ / ____	____ / ____ / ____	____ / ____ / ____

8 Fee. There is a \$30 fee for each return requested. Full payment must be included with your request or it will be rejected. Make your check or money order payable to "United States Treasury." Enter your SSN, ITIN, or EIN and "Form 4506 request" on your check or money order	
a Cost for each return	\$ _____
b Number of returns requested on line 7	_____
c Total cost. Multiply line 8a by line 8b	\$ _____

9 If we cannot find the tax return, we will refund the fee. If the refund should go to the third party listed on line 5, check here

Caution: Do not sign this form unless all applicable lines have been complete

Signature of taxpayer(s). I declare that I am either the taxpayer whose name is shown on line 1a or 2a, or a person authorized to obtain the tax return requested. If the request applies to a joint return, at least one spouse must sign. If signed by a corporate officer, 1 percent or more shareholder, partner, managing member, guardian, tax matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute Form 4506 on behalf of the taxpayer. **Note:** This form must be received by IRS within 120 days of the signature date.

Signatory attests that he/she has read the attestation clause and upon so reading declares that he/she has the authority to sign the Form 4506. See instructions

Phone number of taxpayer on line 1a or 2a _____

Sign Here	▶ Signature (see instructions)	Date
	▶ Print/Type name	Title (if line 1a above is a corporation, partnership, estate, or trust)
	▶ Spouse's signature	Date
	▶ Print/Type name	

Section references are to the Internal Revenue Code unless otherwise noted.

Future Developments

For the latest information about Form 4506 and its instructions, go to www.irs.gov/form4506.

General Instructions

Caution: Do not sign this form unless all applicable lines, including lines 5 through 7, have been completed.

Designated Recipient Notification. Internal Revenue Code, Section 6103(c), limits disclosure and use of return information received pursuant to the taxpayer's consent and holds the recipient subject to penalties for any unauthorized access, other use, or redisclosure without the taxpayer's express permission or request.

Taxpayer Notification. Internal Revenue Code, Section 6103(c), limits disclosure and use of return information provided pursuant to your consent and holds the recipient subject to penalties, brought by private right of action, for any unauthorized access, other use, or redisclosure without your express permission or request.

Purpose of form. Use Form 4506 to request a copy of your tax return. You can also designate (on line 5) a third party to receive the tax return.

How long will it take? It may take up to 75 calendar days for us to process your request.

Where to file. Attach payment and mail Form 4506 to the address below for the state you lived in, or the state your business was in, when that return was filed. There are two address charts: one for individual returns (Form 1040 series) and one for all other returns.

If you are requesting a return for more than one year or period and the chart below shows two different addresses, send your request based on the address of your most recent return.

Chart for individual returns (Form 1040 series)

If you filed an individual return and lived in:

Mail to:

Alabama, Arizona, Arkansas, Florida, Georgia, Louisiana, Mississippi, New Mexico, North Carolina, Oklahoma, South Carolina, Tennessee, Texas, a foreign country, American Samoa, Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands, or A.P.O. or F.P.O. address

Internal Revenue Service
RAIVS Team
Stop 6716 AUSC
Austin, TX 73301

Connecticut, Delaware, District of Columbia, Illinois, Indiana, Iowa, Kentucky, Maine, Maryland, Massachusetts, Minnesota, Missouri, New Hampshire, New Jersey, New York, Pennsylvania, Rhode Island, Vermont, Virginia, West Virginia, Wisconsin

Internal Revenue Service
RAIVS Team
Stop 6705 S-2
Kansas City, MO 64999

Alaska, California, Colorado, Hawaii, Idaho, Kansas, Michigan, Montana, Nebraska, Nevada, North Dakota, Ohio, Oregon, South Dakota, Utah, Washington, Wyoming

Internal Revenue Service
RAIVS Team
P.O. Box 9941
Mail Stop 6734
Ogden, UT 84409

Chart for all other returns

For returns not in Form 1040 series, if the address on the return was in:

Mail to:

Connecticut, Delaware, District of Columbia, Georgia, Illinois, Indiana, Kentucky, Maine, Maryland, Massachusetts, Michigan, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Tennessee, Vermont, Virginia, West Virginia, Wisconsin

Internal Revenue Service
RAIVS Team
Stop 6705 S-2
Kansas City, MO 64999

Alabama, Alaska, Arizona, Arkansas, California, Colorado, Florida, Hawaii, Idaho, Iowa, Kansas, Louisiana, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Texas, Utah, Washington, Wyoming, a foreign country, American Samoa, Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands, or A.P.O. or F.P.O. address

Internal Revenue Service
RAIVS Team
P.O. Box 9941
Mail Stop 6734
Ogden, UT 84409

Specific Instructions

Line 1b. Enter the social security number (SSN) or individual taxpayer identification number (ITIN) for the individual listed on line 1a, or enter the employer identification number (EIN) for the business listed on line 1a. For example, if you are requesting Form 1040 that includes Schedule C (Form 1040), enter your SSN.

Line 3. Enter your current address. If you use a P.O. box, please include it on this line 3.

Line 4. Enter the address shown on the last return filed if different from the address entered on line 3.

Note. If the addresses on lines 3 and 4 are different and you have not changed your address with the IRS, file Form 8822, Change of Address, or Form 8822-B, Change of Address or Responsible Party — Business, with Form 4506.

Line 7. Enter the end date of the tax year or period requested in mm/dd/yyyy format. This may be a calendar year, fiscal year or quarter. Enter each quarter requested for quarterly returns. Example: Enter 12/31/2018 for a calendar year 2018 Form 1040 return, or 03/31/2017 for a first quarter Form 941 return.

Signature and date. Form 4506 must be signed and dated by the taxpayer listed on line 1a or 2a. The IRS must receive Form 4506 within 120 days of the date signed by the taxpayer or it will be rejected. Ensure that all applicable lines, including lines 5 through 7, are completed before signing.



You must check the box in the signature area to acknowledge you have the authority to sign and request the information. The form will not be processed and returned to you if the box is unchecked.

Individuals. Copies of jointly filed tax returns may be furnished to either spouse. Only one signature is required. Sign Form 4506 exactly as your name appeared on the original return. If you changed your name, also sign your current name.

Corporations. Generally, Form 4506 can be signed by: (1) an officer having legal authority to bind the corporation, (2) any person designated by the board of directors or other governing body, or (3) any officer or employee on written request by any principal officer and attested to by the secretary or other officer. A bona fide shareholder of record owning 1 percent or more of the outstanding stock of the corporation may submit a Form 4506 but must provide documentation to support the requester's right to receive the information.

Partnerships. Generally, Form 4506 can be signed by any person who was a member of the partnership during any part of the tax period requested on line 7.

All others. See section 6103(e) if the taxpayer has died, is insolvent, is a dissolved corporation, or if a trustee, guardian, executor, receiver, or administrator is acting for the taxpayer.

Note: If you are Heir at law, Next of kin, or Beneficiary you must be able to establish a material interest in the estate or trust.

Documentation. For entities other than individuals, you must attach the authorization document. For example, this could be the letter from the principal officer authorizing an employee of the corporation or the letters testamentary authorizing an individual to act for an estate.

Signature by a representative. A representative can sign Form 4506 for a taxpayer only if this authority has been specifically delegated to the representative on Form 2848, line 5a. Form 2848 showing the delegation must be attached to Form 4506.

Privacy Act and Paperwork Reduction Act

Notice. We ask for the information on this form to establish your right to gain access to the requested return(s) under the Internal Revenue Code. We need this information to properly identify the return(s) and respond to your request. If you request a copy of a tax return, sections 6103 and 6109 require you to provide this information, including your SSN or EIN, to process your request. If you do not provide this information, we may not be able to process your request. Providing false or fraudulent information may subject you to penalties.

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The time needed to complete and file Form 4506 will vary depending on individual circumstances. The estimated average time is: **Learning about the law or the form**, 10 min.; **Preparing the form**, 16 min.; and **Copying, assembling, and sending the form to the IRS**, 20 min.

If you have comments concerning the accuracy of these time estimates or suggestions for making Form 4506 simpler, we would be happy to hear from you. You can write to:

Internal Revenue Service
Tax Forms and Publications Division
1111 Constitution Ave. NW, IR-6526
Washington, DC 20224.

Do not send the form to this address. Instead, see *Where to file* on this page.

The Oklahoma Community Land Consortium provides af- fordable homes for income-qualifying families to purchase while ensuring that those homes remain affordable - forever!

Neighborhood Housing Services Oklahoma estab-
lished the OK Community Land Consortium (OKCLC)
in 2023 to create lasting opportunities for Oklahoma
neighbors to purchase safe and affordable homes for
their families to grow and thrive in.

The OKCLC is an independent, nonprofit corporation
with its own board of directors made up of NHSOKLA
staff, homeowners, and local housing advocates.

This guide is meant to assist neighbors as they evalu-
ate if purchasing a CLT home is right for them. Should
you have any questions about the program, process,
or purpose of the OK Community Land Consortium,
please contact our team!





Our Land Trust utilizes a model of home that has existed in the United States for over 50 years!

A community land trust (CLT) is a nonprofit organization that provides lasting community assets and shared equity homeownership opportunities for families and communities.

CLTs acquire and hold parcels of land in their service area, create or renovate homes on the land, and then sell those homes to eligible pur-

The nonprofit generally celebrated as being the "first CLT" in the US is New Communities, Inc.

Founded in southwest Georgia in 1969 during the Southern Civil Rights Movement, New Communities was created as a refuge and new home for black farmers who had been forcibly removed from their land by white landowners.

Originally founded as a farming collective on nearly 6,000 acres, New Communities quickly incorporated affordable homeownership in their Land Trust plans - becoming the main inspiration for the modern CLT.



Today there are over 300 CLTs nationwide with over 40,000 units of housing scattered among them.

