



Membership Application

Each person whose income and/or credit will be used must complete a separate application.

CONFIDENTIAL (The information below is needed in order to complete your Credit Analysis)

My Personal Information (This information is not being used to qualify for a specific property – This is only for Credit Analysis)

First Name:		Last Name:	
Address:			
City:		State:	Zip:
Social Security Number:		Date of Birth:	
Day Phone:		Evening Phone:	
Cell Phone or Pager Number:		Best Time to Reach You:	
Email Address:			Is it OK to text you? Yes <input type="checkbox"/> : No <input type="checkbox"/>

My Current Situation (You may place any other comments on reverse)

Have you owned a home in your name during the last three (3) years? Yes <input type="checkbox"/> : No <input type="checkbox"/>	
What is the most you can pay monthly for your new home? \$	How much do you currently pay/mo? \$
What's the most you can put down on your home now? \$	
Do you have a retirement account with your current employer?	<input type="checkbox"/> 401k <input type="checkbox"/> 403b <input type="checkbox"/> IRA <input type="checkbox"/> other _____
Do you have a retirement account with a previous employer?	<input type="checkbox"/> 401k <input type="checkbox"/> 403b <input type="checkbox"/> IRA <input type="checkbox"/> other _____
How long have you been at your current job?	Your spouse?
Are you self employed? Yes <input type="checkbox"/> : No <input type="checkbox"/> : If Yes, how long? _____ and what type of business?	
How is your credit? (Ugly is Ok!) Excellent <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Ugly <input type="checkbox"/> None <input type="checkbox"/> Credit Score (if known) _____	
Do you have - checking <input type="checkbox"/> : savings <input type="checkbox"/> : credit card <input type="checkbox"/> : account(s)	
Have you ever been bankrupt? Yes <input type="checkbox"/> : No <input type="checkbox"/> : If Yes, Chapter 7 <input type="checkbox"/> : Chapter 13 <input type="checkbox"/> : Date Discharged: _____	
Have you ever had a foreclosure? Yes <input type="checkbox"/> : No <input type="checkbox"/>	Have you ever had a car repossessed? Yes <input type="checkbox"/> : No <input type="checkbox"/> : If Yes, Why?
Do you have unpaid student loans? Yes <input type="checkbox"/> : No <input type="checkbox"/>	Do you have any tax liens? Yes <input type="checkbox"/> : No <input type="checkbox"/> : If Yes, how much? \$
Will you and someone else be qualifying with you? Yes <input type="checkbox"/> : No <input type="checkbox"/> : If Yes, their name?	

My Housing Needs

Do you have an idea of the price range home you are looking for?			
In which area(s) do you wish your next home to be in? I'm open <input type="checkbox"/> OR City		County	Zip Codes
How soon are you looking to purchase your next home?		Are you in the Military or a Veteran?	
Minimum # bedrooms you require?	Minimum # bathrooms you require?	Do you require a Garage?	
Do you have any other special requirements?			

How did you hear about us?

Flyer Sign Radio TV Internet Billboard Friend Relative Name: _____

Please accept my application and I hereby give you and any of your team my authorization to request credit reports from up to three consumer credit reporting agencies on my behalf. I understand that I have three (3) business days to cancel this application and thereafter my processing fee becomes non-refundable. I have read and understand the application and the Terms and Conditions of enrollment. I understand that when a property is found that I like I will be required to pay a background check fee of \$35 at that time. If this Path to Home Ownership® Membership Application is being taken in conjunction with a property application then my fee is \$50 + \$35 = \$85. I give this company my permission to contact me now and in the future by phone, text, email and/or mail. I understand that the company may have business relationships with various vendors and I am under no obligation to buy any property or accept any advice or to use any suggested vendor unless I choose to do so.

Signature _____

Date _____

Do Not Write Below This Line – Staff Only

Approved For: Bronze : Silver : Gold : Platinum : VIP : WFE