

Custom Home Finder Program Application

Please tell us about the home you are looking for:

Min Bedrooms: _____ Min Bathrooms: _____ Garage Required?: _____

Square footage: _____ Type of Home: Single Family | Townhome | Condo | Modular

Cities or General Area: _____

Monthly rent range you can handle: _____

Down payment you have to work with: _____ Is that the most you can come up with? _____

When are you looking to move (Month/Day/Year): _____

Why are you moving: _____

Do you have pets: _____ What kind & how many?: _____

How many people will be living with you: _____

Special Requests: _____

How is your credit?: Good | Bad | Ugly Credit Score (if known): _____

Briefly, explain your credit situation: _____

Are you willing to enroll in a Credit Improvement program during the Lease Option period: _____

I understand that there is a processing fee of \$495 that is required to enroll in the Custom Home Finder Program. I understand that I will also be required to look for homes and bring them to Metrolina Realty Holdings, LLC to call the Sellers. If I am approved for the program and Metrolina Realty Holdings, LLC does not present to me at least one home within my criteria within 60 days of the receipt of payment, my processing fee will be refunded. If I am not approved to enter into the Custom Home Finder Program, my processing fee will be refunded. In all other cases, payments are non-refundable.

Signed

Date

Metrolina Realty Holdings, LLC

www.MetrolinaLeasePurchase.com

Office: (704)749-2106 | Fax: (877)588-0903

RENTAL APPLICATION

Address you are applying for: _____

Date of desired occupancy: _____

How much of a down payment can you raise? _____

What monthly payment are you trying to work within for your house payment? _____

APPLICANT #1

Name: _____

E-Mail: _____

Primary Phone: _____ Work Phone: _____

Social Security Number: _____ Driver's License # / State: _____

Birth Date: _____ Criminal Record (Yes / No / Minor): _____

Employer: _____ Position: _____ How Long? _____

Address _____ Phone: _____

Total Gross Monthly Income: \$ _____

Extra Sources of Income: _____ Amount: _____

Extra Sources of Income: _____ Amount: _____

APPLICANT #2

Name: _____

E-Mail: _____

Primary Phone: _____ Work Phone: _____

Social Security Number: _____ Driver's License # / State: _____

Birth Date: _____ Criminal Record (Yes / No / Minor): _____

Employer: _____ Position: _____ How Long? _____

Address _____ Phone: _____

Total Gross Monthly Income: \$ _____

Extra Sources of Income: _____ Amount: _____

Extra Sources of Income: _____ Amount: _____

OTHER PEOPLE TO BE LIVING IN THE HOME

Name: _____ Relationship: _____ SSN#: _____ Birth: _____

Name: _____ Relationship: _____ SSN#: _____ Birth: _____

Name: _____ Relationship: _____ SSN#: _____ Birth: _____

Name: _____ Relationship: _____ SSN#: _____ Birth: _____

Pets / What Kind / How Many: _____

RESIDENCE HISTORY

Present Address: _____

City: _____ State: _____ Zip: _____

How Long? _____ If renting, Apartment name: _____

Monthly Payment: \$ _____

Landlord Name _____ Phone: _____

Previous Address: _____

City: _____ State: _____ Zip: _____

How Long? _____ If renting, Apartment name: _____

Monthly Payment: \$ _____

Landlord Name _____ Phone: _____

CHARACTER REFERENCE

Name: _____ Relationship: _____ Phone: _____
Name: _____ Relationship: _____ Phone: _____

I declare that the application is complete, true and correct and I herewith give my permission for anyone contacted to release the credit or personal information of the undersigned applicant to Management or their authorized agents, at any time, for the purposes of entering into and continuing to offer or collect on any agreement and/or credit extended. I further authorize Management or their Authorized Agents to verify the application information including but not limited to obtaining criminal records, contacting creditors, present or former landlords, employers and personal references, whether listed or not, at the time of the application and at any time in the future, with regard to any agreement entered into with Management. Any false information will constitute grounds for rejection of this application, or Management may at any time immediately terminate any agreement entered into in reliance upon misinformation given on the application.

Applicant #1

Date

Applicant #2

Date

*****UPON COMPLETION, FAX TO: 877-588-0903*****