

**Raleigh Funding Group, Inc. – 919-233-7358 – www.RaleighFunding.com**

**Mailing Address: PO Box 295 • Cary, NC 27512**

**Street Address: 975 Walnut St. – Suite 300-C • Cary, NC 27511**

**Application - Please Print Clearly - To Process Immediately - FAX to 919-233-3879**

Address of desired Property:

Date:

To guarantee compliance with the North Carolina and Federal Fair Housing Acts, information is required for each applicant over the age of eighteen (excluding dependent children) who will reside at the property.

**PLEASE PRINT**

**Applicant's Full Name:**

Social Security #:

Date of Birth:

Driver's License #:

State:

Home Phone #:

Work Phone #:

Cell #:

**Co-Applicant's Name:**

Social Security #:

Date of Birth:

Driver's License #:

State:

Home Phone #:

Work Phone #:

Cell #:

**Current Address:**

City:

State:

Zip:

Move-in date:

Move-out Date:

Rent \$:

Why Moving?

Landlord:

Phone #:

**LIST YOUR CURRENT EMPLOYMENT**

**Applicant's Employer:**

Hire Date:

Phone #:

Position:

Address:

City:

Zip:

Gross monthly pay: \$

Hours per week:

Supervisor:

**Co-Applicant's Employer:**

Hire Date:

Phone #:

Position:

Address:

City:

Zip:

Gross monthly pay: \$

Hours per week:

Supervisor:

**OTHER INCOME YOU WOULD LIKE US TO CONSIDER**

(For example: Spousal support, child support, disability, social security, self employment etc...)

1. Source:

Gross amount per month: \$

2. Source:

Gross amount per month: \$

3. Source:

Gross amount per month: \$

**LIST TWO (2) PERSONAL REFERENCES TO CONTACT IN CASE OF EMERGENCY**

Name:

Address:

Phone #:

Relationship:

How long known?

Name:

Address:

Phone #:

Relationship:

How long known?

**LIST ALL VEHICLES OWNED**  
**Make/Model/Year**

**Vehicle**

**License #/ State**

**LIST ALL DEBT YOU OWE INCLUDING CREDIT CARDS (use an additional sheet, if necessary)**

Name:	Address:	
\$ Limit/Purpose:	Balance owed: \$	Mo. Payment:
Account #:	Phone #:	
Name:	Address:	
\$ Limit/Purpose:	Balance owed: \$	Mo. Payment:
Account #:	Phone #:	
Name:	Address:	
\$ Limit/Purpose:	Balance owed: \$	Mo. Payment:
Account #:	Phone #:	
Name:	Address:	
\$ Limit/Purpose:	Balance owed: \$	Mo. Payment:
Account #:	Phone #:	

**ANSWER YES OR NO TO THE FOLLOWING QUESTIONS: (These questions apply to both Applicant & Co-Applicant.)**

**Are you prepared to take on the burden of home ownership, including maintenance and repairs?**

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**Are you prepared to make the monthly payments in full every month on the 1<sup>st</sup> of the month?**

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**Will you have the entire down payment available prior to moving in?**

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Have you ever been evicted from a property?

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Have you ever willfully and intentionally refused to pay rent when due?

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If divorced, are you obligated to pay child support or alimony? If yes, how much? \$

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**LIST ALL INDIVIDUALS THAT WILL RESIDE IN THE ABOVE PROPERTY, THEIR NAMES & BIRTHDATES.**

1.	2.
3.	4.
5.	6.
7.	8.

NOTE: APPLICATIONS WILL NOT be accepted on a "FIRST-COME, FIRST-SERVED BASIS." THIS PROPERTY IS MANAGED BY A PRINCIPAL REPRESENTING HIS INTEREST AND/OR OF THE OWNER OF THE REAL PROPERTY. THE CORPORATION WILL ASSIST ALL PERSONS WITHOUT REGARD TO RACE, COLOR, CREED, SEX, RELIGION, NATIONAL ORIGIN, FAMILIAL STATUS, MARITAL STATUS, OR HANDICAP, OR ANCESTRY.

Applicant agrees that all credit information maintained by Raleigh Funding Group, Inc. may be given to any credit reporting service or other persons who request it. Applicant hereby certifies that the information supplied in this application is true. Applicant understands that any false answers or statements made will be sufficient grounds for eviction/forfeiture.

Applicant authorizes present and past landlords and Employers, Banks, Credit references, personal references, and any other person to release information regarding applicants credit, rental and employment history.

_____ Applicant Signature	_____ Date	_____ Co-Applicant Signature	_____ Date
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Please be sure the application is filled out accurately and completely. This will ensure a timely and accurate response.

**This application may be FAXED for Processing to: 919-233-3879**