



**MGB FINANCIAL SERVICES, INC.**

18300 Gridley Road Suite "F", Artesia,, CA 90701

**Phone No.: (562) 809-2643 or Pager: 562-628-3362**

**Fax No.: (562) 684-4278**

E-Mail: *mgbloan@yahoo.com* Web: *www.HomeBuyingSelling.com*

**Thank you for giving us the opportunity to be of service to you. Enclosed herewith information requested by you. EXTRA--- EXTRA More programs (See attached flyer)**

**We also have special city & or county loan program in other cities that have been successfully turning renters into Homeowners..... Please complete this form to find out what program is best for you.**

**ATTN: LOKESH**

**Please fill out completely, sign @ bottom & fax back or mail to us A.S.A.P**

**APPLICATION FOR PURCHASE/RENT TO OWN**

Prospect Name: \_\_\_\_\_ Social Security: \_\_\_\_\_

Spouse: \_\_\_\_\_ Social Security: \_\_\_\_\_

Present Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone No: \_\_\_\_\_ Best time to contact you: \_\_\_\_\_

Work Phone No: \_\_\_\_\_ Spouse Work Phone No: \_\_\_\_\_

Email: \_\_\_\_\_

**Amount of savings, cash on hand, or cash reserves? \$ \_\_\_\_\_**

Where do you presently work? \_\_\_\_\_ Years at job: \_\_\_\_\_

Where does your spouse work? \_\_\_\_\_ Years at job: \_\_\_\_\_

Location / Cities desired: \_\_\_\_\_

Do you have collection accounts? \_\_\_\_\_, If yes, are you willing to pay them? \_\_\_\_\_

Have you or your spouse filed Bankruptcy? Yes \_\_\_\_\_ No \_\_\_\_\_, If yes, when was it discharged? \_\_\_\_\_

Do you have any foreclosure \_\_\_\_\_, If yes, when \_\_\_\_\_

COMMENTS: \_\_\_\_\_

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**MONTHLY OBLIGATION:**

**GROSS MONTHLY INCOME:**

Auto Payments \$ \_\_\_\_\_

For you \$ \_\_\_\_\_ Circle one: hourly/weekly/monthly

Trades (CREDIT CARDS) \$ \_\_\_\_\_

Other \$ \_\_\_\_\_

Child Support- Alimony \$ \_\_\_\_\_

Spouse \$ \_\_\_\_\_ Circle one: hourly/weekly/monthly

Present rent \$ \_\_\_\_\_

Other \$ \_\_\_\_\_

**AUTHORIZATION TO RELEASE INFORMATION**

I / We (undersigned) give MGB financial services, Inc. or its assigns permission/authorization to inquire with standard credit reporting agencies for my/ our credit report. A copy of this authorization may be accepted as an original.

\_\_\_\_\_  
Borrower Date

\_\_\_\_\_  
Co-Borrower Date

Loan Agent \_\_\_\_\_ Date \_\_\_\_\_

FICO \_\_\_\_\_ RATIO \_\_\_\_\_ Approved/Denial/Other program/Disposition: \_\_\_\_\_