

DAKOTALAND HOMES 1028 South Lyons Sioux Falls, SD 57106	APPLICATION	(605)335-8122 Fax (605) 335-8130 www.dakotalandhomes.com
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APPLICANT										
Name:					Birth Date:			Soc Sec #:		
Home Phone:				Cell Phone Number:				Status:		
Number of Dependent Children:			Ages:					Home Status:		

LANDLORD INFORMATION												
Present Address:							How Long:		Yr.		Mos.	
Landlord Name:					Phone #:			Monthly Payment:				
Previous Address:							How Long:		Yr.		Mos.	
Landlord Name:					Phone #:			Monthly Payment:				

RELATIVE INFORMATION										
Name of Nearest Relative not living with you:								Relationship:		
Address:							Phone #:			

APPLICANT EMPLOYMENT											
Employer:					City, State:			Phone #:			
Job Title:				Hire Date:			Gross Salary:			Per:	
Previous Employer:					City, State:						
Phone #:				Employed From:			To				

APPLICANT'S OTHER INCOME Note: Alimony, child support, or separate maintenance income need not be revealed unless you want them considered as a basis for repaying this obligation.										
Source:					Monthly Amount					

CREDIT INFORMATION										
Checking Account:				Account #:			Balance:			
Savings Account:				Account #:			Balance:			
401K/Retirement Accounts: Monthly Investment:					Balance to Date:					

OBLIGATIONS											
Largest Monthly Obligation-Bank Name:					Phone #:			Acct No:			
Collateral:				Current Balance:			Mo Payment:			Date Open	
Alimony/Child Support Payment:					Mo Payment:						

VOLUNTARY INFORMATION FOR GOVERNMENT MONITORING PURPOSES									
The following information is requested by the federal government for certain types of loans related to a dwelling in order to monitor the lender's compliance with equal credit opportunity, fair housing, and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. The law provides that a lender may not discriminate on the basis of this information, or on whether you choose to furnish it. For race, you may check more than one designation. If you do not furnish ethnicity, race, or sex, under Federal regulations this lender is required to note the information on the basis of visual observation or surname. If you do not wish to furnish the information, please check the box below. (Lender must review the above material to assure that the disclosures satisfy all requirements to which the lender is subject under applicable state law for the particular type of loan applied for.)									
<input type="checkbox"/> I do not wish to furnish this information					Race: <input type="checkbox"/> Native Hawaiian or other Pacific Islander				
Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino					<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian				
Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male					<input type="checkbox"/> Black or African American <input type="checkbox"/> White				

I HEREBY DECLARE THAT ALL OF THE STATEMENTS MADE IN THIS APPLICATION ARE TRUE AND CORRECT AND ARE MADE FOR THE PURPOSE OF OBTAINING CREDIT. CAJ ENTERPRISES, INC. IS AUTHORIZED TO INVESTIGATE MY CREDIT RECORD, TO VERIFY MY CREDIT, EMPLOYMENT AND INCOME REFERENCES, TO OBTAIN SUCH OTHER INFORMATION AS CAJ ENTERPRISES, INC., DEEMS NECESSARY, AND TO GIVE CREDIT REPORTING AGENCIES (CREDIT BUREAUS) AND OTHER INFORMATION REGARDING CAJ ENTERPRISES, INC. CREDIT EXPERIENCE WITH ME									
Applicant's Signature: _____					Date: _____				

Copy of Drivers License Please

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