

SANTIAGO FINANCIAL, INC.
 150 El Camino Real – Suite 112
 Tustin, CA 92780
 (800) 232-3908 - fax (714) 731-3908

MANUFACTURED HOME APPLICATION

THIS APPLICATION IS DESIGNED TO BE COMPLETED BY THE APPLICANT
 You may apply for Credit either individually or Jointly with a Co-Applicant

Date: _____
 Acct #: _____
 Center: _____

- If this is an INDIVIDUAL Request for Credit, complete the information under Sections A, C, D, E and F.
- If this is a JOINT Request for Credit (NOTE: If married, the spouse is not required to be a joint applicant), complete the information under Sections A through F. If additional space is needed, use the corresponding section(s) of a separate application form.

A APPLICANT

NAME: FIRST INITIAL LAST			DATE OF BIRTH	SOCIAL SEC. NO.	TOT. DEP'S INCL APPLICANT	HOME PHONE
ADDRESS – STREET & NUMBER			CITY	STATE	ZIP CODE	AT ADDRESS
REAL ESTATE: IN WHOSE NAME			MTG. HOLDER OR LANDLORD	PHONE NO.	<input type="checkbox"/> CONVENTIONAL <input type="checkbox"/> LAND CONTRACT	COST
PRIOR ADDRESS – COMPLETE IF AT PRESENT ADDRESS LESS THAN 3 YRS.			EMPLOYMENT (IF SELF EMP. – NAME OF BUSINESS)			BALANCE
BUSINESS ADDRESS – CITY/STATE/ZIP			PHONE NO.	JOB TITLE	PREV. EMP – IF PRES. EMP LESS THAN 2 YRS.	VALUE TODAY
NEAREST RELATIVE - NAME			RELATIONSHIP	NEAREST FRIEND		
ADDRESS: STREET & NUMBER			CITY	STATE/ZIP	PHONE	ADDRESS – STREET & NUMBER
MARITAL STATUS <input type="checkbox"/> UNMARRIED <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPERATED			APPLICABLE TO COMMUNITY PROPERTY STATES ONLY THIS APPLICATION IS BASED UPON <input type="checkbox"/> MY (OUR) MARITAL COMMUNITY <input type="checkbox"/> MY SOLE AND SEPARATE PROPERTY AND INCOME			IS ANY OF THE DOWNPAYMENT BORROWED? <input type="checkbox"/> NO <input type="checkbox"/> YES

B COAPPLICANT

NAME: FIRST INITIAL LAST			DATE OF BIRTH	SOCIAL SEC. NO.	TOT. DEP'S INCL APPLICANT	HOME PHONE
ADDRESS – STREET & NUMBER			CITY	STATE	ZIP CODE	AT ADDRESS
REAL ESTATE: IN WHOSE NAME			MTG. HOLDER OR LANDLORD	PHONE NO.	<input type="checkbox"/> CONVENTIONAL <input type="checkbox"/> LAND CONTRACT	COST
PRIOR ADDRESS – COMPLETE IF AT PRESENT ADDRESS LESS THAN 3 YRS.			EMPLOYMENT (IF SELF EMP. – NAME OF BUSINESS)			BALANCE
BUSINESS ADDRESS – CITY/STATE/ZIP			PHONE NO.	JOB TITLE	PREV. EMP – IF PRES. EMP LESS THAN 2 YRS.	VALUE TODAY
NEAREST RELATIVE - NAME			RELATIONSHIP	NEAREST FRIEND		
ADDRESS: STREET & NUMBER			CITY	STATE/ZIP	PHONE	ADDRESS – STREET & NUMBER
MARITAL STATUS <input type="checkbox"/> UNMARRIED <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPERATED			APPLICABLE TO COMMUNITY PROPERTY STATES ONLY THIS APPLICATION IS BASED UPON <input type="checkbox"/> MY (OUR) MARITAL COMMUNITY <input type="checkbox"/> MY SOLE AND SEPARATE PROPERTY AND INCOME			IS ANY OF THE DOWNPAYMENT BORROWED? <input type="checkbox"/> NO <input type="checkbox"/> YES

C NOTICE

IMPORTANT

YOU ARE NOT REQUIRED TO DISCLOSE INCOME FROM ALIMONY, CHILD SUPPORT OR MAINTENANCE UNLESS YOU WANT US TO CONSIDER IT IN CONNECTION WITH THIS APPLICATION

IF YOU RECEIVE AND OFFER INCOME FROM ALIMONY, CHILD SUPPORT OR SEPARATE MAINTENANCE, IS IT UNDER:
 APPLICANT CHECK: COURT ORDER WRITTEN AGREEMENT ORAL UNDERSTANDING
 CO-APPLICANT CHECK: COURT ORDER WRITTEN AGREEMENT ORAL UNDERSTANDING

D INCOME

MONTHLY GROSS EMPLOYMENT INCOME	\$ _____	\$ _____	INCOME RECEIVED BUT NOT ON MONTHLY BASIS: \$ _____ EXPLAIN: _____	IS THERE ANY REASON THAT THE INCOME LISTED IS LIKELY TO BE REDUCED BEFORE THIS CREDIT TRANSACTION IS PAID OFF? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, EXPLAIN: _____
OTHER INCOME – EXPLAIN Example – Overtime, Dividends, Public Assistance	\$ _____	\$ _____		
TOTAL GROSS MONTHLY INCOME	\$ _____	\$ _____	COMBINED TOTAL INC. \$ _____	

F CREDIT INFORMATION

LIST ALL YOUR OBLIGATIONS, INCLUDING THE OBLIGATION TO PAY ALIMONY, CHILD SUPPORT, OR MAINTENANCE

NAME OF CREDITOR AND OBLIGATION	PHONE NO.	ACCOUNT NUMBER	BALANCE	MONTHLY PAYMENT	PLEASE CHECK	
					APPLICANT	CO-APPLICANT

HAVE YOU EVER HAD A REPOSESSION?	APPLICANT <input type="checkbox"/> YES <input type="checkbox"/> NO	CO-APPLICANT <input type="checkbox"/> YES <input type="checkbox"/> NO	HAVE YOU FILED BANKRUPTCY IN THE LAST 7 YEARS?	APPLICANT <input type="checkbox"/> YES <input type="checkbox"/> NO	CO-APPLICANT <input type="checkbox"/> YES <input type="checkbox"/> NO
HAVE YOU EVER HAD ANY JUDGEMENTS ENTERED AGAINST YOU?	APPLICANT <input type="checkbox"/> YES <input type="checkbox"/> NO	CO-APPLICANT <input type="checkbox"/> YES <input type="checkbox"/> NO	ARE YOU PARTY TO A LAWSUIT?	APPLICANT <input type="checkbox"/> YES <input type="checkbox"/> NO	CO-APPLICANT <input type="checkbox"/> YES <input type="checkbox"/> NO
BANK REFERENCE – BRANCH	<input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS <input type="checkbox"/> LOAN		BANK REFERENCE – BRANCH	<input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS <input type="checkbox"/> LOAN	

Other Liabilities

Are you liable for alimony, child support or maintenance payments?
 Yes No If yes, \$ _____ per _____ for _____ months

Do you have any lease obligations?
 Yes No If yes, \$ _____ per _____ for _____ months

Are you an endorser, guarantor, co-maker?
 Yes No If yes, describe: _____

Misc.

OCCUPANCY: Primary Residence Seasonal/Vacation Home
 Investment/Purchase for someone else to occupy - Buy For

LOAN PURPOSE: Purchase Refinance Chase-to-Chase Refi Cash-Out Refi
 IF REFI, PURPOSE: Rate & Term Home Improvement Home Purchase Other :

LOAN/PRODUCT TYPE: Home Only Land Home
 (Retailers) For Land Home Single Staged Multi Staged WIN Point

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 discriminate neither on the basis of this information, nor on whether you choose to furnish it. If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation. If you choose not to furnish it, under Federal regulations this Lender is required to note ethnicity, race and sex on the basis of visual observation or surname. If you do not wish to furnish the above 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.)

F

APPLICANT: I do not wish to furnish this information <input type="checkbox"/>	CO-APPLICANT: I do not wish to furnish this information <input type="checkbox"/>
ETHNICITY <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	ETHNICITY <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino
RACE <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian or Pacific Islander	RACE <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian or Pacific Islander
<input type="checkbox"/> American Indian or Alaska Native	<input type="checkbox"/> American Indian or Alaska Native
<input type="checkbox"/> White <input type="checkbox"/> Black/African American	<input type="checkbox"/> White <input type="checkbox"/> Black/African American
SEX: <input type="checkbox"/> Male <input type="checkbox"/> Female	SEX: <input type="checkbox"/> Male <input type="checkbox"/> Female

To be completed by the interviewer. This application was taken by: Face to Face Interview Mail Telephone Internet

THIS APPLICATION CONTINUES ON THE REVERSE SIDE

APPLICANT _____

CO-APPLICANT _____

Personal Financial Statement (Additional Information)

ASSETS		LIABILITIES	
Cash	\$	Payable (bills)	\$
Investments	\$	Payable (notes & accounts)	\$
Residence	\$	Pledged Stocks	\$
Additional Properties	\$	Real Estate Indebtedness	\$
Receivables (Notes & Accounts)	\$	Medical Bills	\$
Other Assets (Itemize)	\$	Other Liabilities (Itemize)	\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
Total Assets	\$	Total Liabilities	\$
NET WORTH (Assets minus Liabilities)		\$	

Retailer/Broker complete the following

Retailer / Broker Name		Location	Salesperson	Phone No. ()
Year/Make of Mfd. Home Model	<input type="checkbox"/> New <input type="checkbox"/> Used Size	Cash Selling Price \$	Trade In - Year / Make	Monthly <input type="checkbox"/> Rent <input type="checkbox"/> Payment
<input type="checkbox"/> Inv. Cost <input type="checkbox"/> Bk. Val. Other deletions: \$	App'l \$ Less Freight \$ \$	Taxes \$	Model Size	Placement of Home <input type="checkbox"/> Own Land <input type="checkbox"/> Relative's Land <input type="checkbox"/> Private Property <input type="checkbox"/> Other Street Address
Options at Retailer Cost AC- Deck \$ Heat Pump \$ Skirting \$ Washer/Dryer \$ Other:		Fees \$	A. Retailer Allowance \$	City State Zip
		Down Payment \$	B. Less Pay Off \$	County
Total Retailer Cost/Value \$		Unpaid Balance \$	C. Net Trade (A-B) \$	Phone No. of Landlord or Mortgage Holder
Suggested Figures on Contract:	Suggested Term	Suggested Payment \$	D. Cash Down \$	If Applicant owns Land/Lot. Purchase Price \$
		Insurance Amount \$	Total (C + D) \$	Owes <input type="checkbox"/> Value <input type="checkbox"/> App'l. \$ \$
		Amount Financed \$		

Broker complete the following for refinance, only

Current Lender		Account No.		Phone No.
Year Purchased	Purchase Price \$	Balance Owed \$	Payoff (if different) \$	Cash Out Requested \$

NOTICE to Massachusetts Applicants: You have the right to obtain a free copy of your credit report within sixty days from the consumer credit reporting agency providing the credit information to **Santiago Financial, Inc.**

NOTICE to Maine Applicants: A consumer report may be requested in connection with this application for credit and in connection with updates, renewals and extensions of any credit granted as a result of this application. Upon request, you will be informed if a consumer report was actually obtained and, if so the name of each consumer reporting agency from which a consumer report was obtained.

NOTICE to New York Applicants: A consumer report may be requested in connection with this application for credit and in connection with updates, renewals and extensions of any credit granted as a result of this application. Upon request, you will be informed if a consumer report was actually obtained and, if so the name of each consumer reporting agency from which a consumer report was obtained.

NOTICE to Ohio Applicants: The Ohio Laws against discrimination require that all creditors make credit equally available to all creditworthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law.

NOTICE to California Applicants: A married applicant may apply for credit individually.

NOTICE to Washington State Applicants: Please let us know if we should investigate your credit references and/or credit history under another name.

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

In addition to **Santiago Financial, Inc.**, located at the address stated on the reverse side, this application may be submitted to the following financial institution(s) [provide name and address]: _____

"you" and "your" mean the applicant and co-applicant; "we", "us" and "our" mean the retailer/broker, if any, and Santiago Financial, Inc., and any other financial institution(s) named above.

You warrant that the information you are furnishing above and on the reverse side is true, accurate, supplied voluntarily, and not misleading. You authorize us, at our option: to check your credit and employment histories and credit references; to discuss this application and related information with your retailer/broker, if any, named above; to answer questions about your credit history with us; and to keep this application whether or not it is approved. We may obtain consumer credit reports periodically from one or more consumer reporting agencies (credit bureaus) in connection with your application and any update, renewal, refinancing, modification or extension of the credit. We or any affiliate of ours may obtain one or more consumer credit reports on you from time to time for any legitimate business purpose. If you ask, you will be told whether a credit report was requested, and if so, the name and address of any credit bureau from which we or our affiliate obtained your credit report. We may also verify your employment, pay, assets and debts. You agree that anyone receiving a copy of this is authorized to provide us with such information.

You understand that **Santiago Financial, Inc.** extends credit at different rates and credit terms and agree that you are applying for an extension of credit and not for a particular rate or particular credit terms.

Witness _____ Co-Applicant Signature _____

Witness _____ Applicant Signature _____