PRE-MORTGAGE CERTIFICATION NOTICE

THE GOVERNMENT REQUIRES THE INFORMATION ASKED ON THE PREQUAL FORM TO BE COMPLETED BY EACH OF THE BUYERS ON A SEPARATE FORM IF THE LAST NAME IS DIFFERENT AND THE BUYERS MAY IN THE FUTURE WANT TO SUBMIT A CONTRACT OF PURCHASE ON A GOVERNMENT OWNED HOME WHICH IS THE MOST REASONABLE TYPE TO PURCHASE BECAUSE OF ALL THE BENEFITS. BEFORE ANYONE IS PERMITTED TO SUBMITT A CONTRACT BY THE CERTIFIED BROKER, THE GOVERNMENT UNDERWRITER MUST HAVE BEEN FURNISHED THE FORM TO DETERMINE THE QUALIFICATIONS OF EACH PURCHASER AND A CERTIFICATION WILL BE ISSUED THAT MUST ACCOMPANY AN OFFER OF CONTRACT OR THE CONTRACT WILL NOT BE CONSIDERED. THIS IS THE FIRST NECESSARY STEP TO BECOME ELIGIBLE TO SUBMIT A CONTRACT AND ALSO WILL GUIDE THE BUYER IN THE RIGHT PRICE RANGE OF ONLY ADDRESSES OFFERED WITHIN THAT PRICE RANGE. THERE IS NO COST OR OBLIGATION BY COMPLETING THE NECESSARY BLANKS OF THE CONFIDENTAL FORM USED TO GET THE CERTIFICATION. RETURN THE FORM WITHOUT DELAY. YOU WILL BE FURNISHED ALL ADDRESSES AND CONTINUE TO BE FURNISHED ANY ADDITIONAL ADDRESSES THAT BECOMES AVAILABLE IN YOUR PRE QUALIFIED PRICE RANGE the government underwriter has established based on the information you have furnished on the form you submitted.

<u>Information accuracy reproduced as received.</u>

SCROLL DOWN TO SECOND PAGE

Date			To:			
Mailing Address 817 468 413 Sussex Dr. FAX: 8		317 468-13 FAX: 817 4	EUGENE H. HAVRAN Mobil: (817) 296-2400 68-1313 24 Hour - 7 Day: hehav@yahoo.com		296-2400	
Pre-Mortgage Certification						
BUYER			SS#		AGE	
2 nd BUYER			SS#		AGE	
(Separate Application Form for each person other than spouse.)						
FULL ADDR	ESS		C	CITY	ZIP	
PHONE HOME WORK				FAX		
Lease expired GROSS MONTH VERIFIED FROM Buyer Empl 2nd Buyer Er	NDENTS (yes/no) ILY INCOME BOF M W-2 OR 1099 FO oyer nployer	RROWER	_RENT OR HOUSDate e	SE PMT xpired CO-BORROWE .D NEED 2 YEARS # Mor_ _#Mor_	ERS INCOME TAX & PL onthsonths	
Need 24 month work history of each buyer, use extra page if necessary. Extra Income BORROWER CO-BORROWER						
CURRENT DEBTS	MONTHLY ACCOUNTS OW	ED	MINIMUM MONTHLY PA		only if. (10 months or less) BALANCE LEFT	
	(PLEASE	USE BACK OF FO	RM IF ADDITIONAL	 L SPACE IS NEEDED.)		
THE ABOVE INFO	RMATION IS TRUE &	CORRECT TO TH	E BEST OF MY/OU	R KNOWLEDGE		
				ES ASSIGNS PERMISSI ELEASED FOR ANY C	ION TO REVIEW MY CREDIT OTHER USE.	
BORROWER			CO-BORROWER			