

## Private Leverage LLC P.O. Box 8154 Houston,TX 77288 Phone: 281-706-4049

www.privateleverage.com

| Loan Application - Fill Out Completely                                                                                                                                                                                                                                                                                            |                               |          |          |                 |      |               |             |                                                                                  |          |                    |      |                        |              |           |  |   |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|----------|----------|-----------------|------|---------------|-------------|----------------------------------------------------------------------------------|----------|--------------------|------|------------------------|--------------|-----------|--|---|
| Investor Profile Background - Fill Out Completely                                                                                                                                                                                                                                                                                 |                               |          |          |                 |      |               |             |                                                                                  |          |                    |      |                        |              |           |  |   |
|                                                                                                                                                                                                                                                                                                                                   |                               |          |          |                 |      |               |             | Duong. Cana .                                                                    | lii Gut  | Completely         |      |                        |              |           |  |   |
| Have you been declared bankrupt within the past 7 years?  Yes No                                                                                                                                                                                                                                                                  |                               |          |          |                 |      |               |             |                                                                                  |          |                    |      |                        |              |           |  |   |
| Have you had property foreclosed upon or given title or deed in lieu thereof in the last 7 years?  Yes No Are you a U.S. citizen?  Yes No                                                                                                                                                                                         |                               |          |          |                 |      |               |             |                                                                                  |          |                    |      |                        |              |           |  |   |
| Are you a permanent resident alien?  Yes No                                                                                                                                                                                                                                                                                       |                               |          |          |                 |      |               |             |                                                                                  |          |                    |      |                        |              |           |  |   |
| How many homes have you purchased and renovated?                                                                                                                                                                                                                                                                                  |                               |          |          |                 |      |               |             |                                                                                  |          |                    |      |                        |              |           |  |   |
| Personal Information of Borrower - Fill Out Completely                                                                                                                                                                                                                                                                            |                               |          |          |                 |      |               |             |                                                                                  |          |                    |      |                        |              |           |  |   |
| Last: Middle: Fir                                                                                                                                                                                                                                                                                                                 |                               |          |          |                 |      |               |             |                                                                                  |          |                    |      |                        |              |           |  |   |
| Social Security Number:                                                                                                                                                                                                                                                                                                           |                               |          |          |                 |      |               |             |                                                                                  |          |                    |      | OB:                    |              |           |  |   |
| Marriage Status                                                                                                                                                                                                                                                                                                                   |                               |          |          | Will you        |      |               |             | r spouse be on the Loan                                                          |          |                    |      |                        |              |           |  |   |
|                                                                                                                                                                                                                                                                                                                                   |                               |          |          |                 |      | Pers          | sonal Info  | rmation of Spous                                                                 | se / CO  | -Borrower          |      |                        |              |           |  |   |
| Last:                                                                                                                                                                                                                                                                                                                             |                               |          |          |                 |      |               | Middle:     | e: First                                                                         |          |                    |      |                        |              |           |  |   |
| Social Security Number:                                                                                                                                                                                                                                                                                                           |                               |          |          |                 |      |               |             |                                                                                  |          |                    | D    | OB:                    |              |           |  |   |
| Relation Ship to                                                                                                                                                                                                                                                                                                                  | o Borrow                      | er       |          |                 |      |               |             |                                                                                  |          |                    |      |                        |              |           |  |   |
| If you are buying in your personal name your spouse will need to sign on the Deed of Trust.                                                                                                                                                                                                                                       |                               |          |          |                 |      |               |             |                                                                                  |          |                    |      |                        |              |           |  |   |
| Contact Information of Borrower                                                                                                                                                                                                                                                                                                   |                               |          |          |                 |      |               |             |                                                                                  |          |                    |      |                        |              |           |  |   |
| Home Phone:                                                                                                                                                                                                                                                                                                                       |                               |          |          |                 |      | Mobile Phone: |             |                                                                                  |          |                    |      |                        |              |           |  |   |
| Fax:                                                                                                                                                                                                                                                                                                                              |                               |          |          |                 |      | Email:        |             |                                                                                  |          |                    |      |                        |              |           |  |   |
| Street:                                                                                                                                                                                                                                                                                                                           |                               |          |          |                 |      |               | City:       |                                                                                  |          |                    | Stat | e:                     |              | Zip:      |  |   |
| Company Information of Borrower (LLC)                                                                                                                                                                                                                                                                                             |                               |          |          |                 |      |               |             |                                                                                  |          |                    |      |                        |              |           |  |   |
| Business Name:                                                                                                                                                                                                                                                                                                                    |                               |          |          |                 |      |               |             |                                                                                  |          |                    |      |                        | Federa       | l Tax ID: |  |   |
| Street: City:                                                                                                                                                                                                                                                                                                                     |                               |          |          |                 |      |               |             |                                                                                  |          | Stat               | e:   | Zip:                   |              |           |  |   |
|                                                                                                                                                                                                                                                                                                                                   |                               |          |          |                 |      |               | Employn     | nent Information                                                                 | of Borr  | rower              |      |                        |              |           |  |   |
| Company Nam                                                                                                                                                                                                                                                                                                                       | e:                            |          |          |                 |      |               |             |                                                                                  |          |                    |      | Monthly Incor          | ne           |           |  |   |
| Street:                                                                                                                                                                                                                                                                                                                           |                               |          |          |                 |      |               |             | City:                                                                            |          |                    |      | State:                 | Zip:         |           |  |   |
|                                                                                                                                                                                                                                                                                                                                   |                               |          |          |                 |      |               | Property    | Information Seek                                                                 | ing Lo   | an On              |      |                        | ,            |           |  |   |
| Street:                                                                                                                                                                                                                                                                                                                           |                               |          |          |                 |      |               |             |                                                                                  | City:    |                    |      |                        | State/ Zip 0 |           |  |   |
| Subdivision:                                                                                                                                                                                                                                                                                                                      |                               |          |          |                 |      |               |             | Lot/Block                                                                        |          |                    |      | Key N                  |              |           |  |   |
| Bedrooms:                                                                                                                                                                                                                                                                                                                         | edrooms: Bath:                |          | Bath:    | Garage:         |      |               |             | Orignal Square Footage:                                                          |          |                    | •    | Add-On Square Footage: |              |           |  | - |
| Are you adding                                                                                                                                                                                                                                                                                                                    | re you adding Square Footage: |          | e:       | Lot Size:       |      |               | Year Built: |                                                                                  |          | Type of Foundation |      |                        |              |           |  |   |
| Central Heat/A                                                                                                                                                                                                                                                                                                                    | ir:                           |          | Well or  | Septic YES      | or N | Ю             |             | If property has well or septic then an inspection may be required prior to close |          |                    |      |                        |              |           |  |   |
| Has Property F                                                                                                                                                                                                                                                                                                                    | looded Y                      | 'ES or I | NO:      |                 |      |               | •           |                                                                                  |          |                    |      |                        |              |           |  |   |
|                                                                                                                                                                                                                                                                                                                                   |                               |          | Į.       |                 |      |               |             | Loan Type                                                                        |          |                    |      |                        |              |           |  |   |
|                                                                                                                                                                                                                                                                                                                                   | Will this                     | s prope  | ty be fo | r rental or fli | p?   |               |             |                                                                                  |          |                    |      |                        |              |           |  |   |
| Purchase Price: Repairs:                                                                                                                                                                                                                                                                                                          |                               |          |          |                 |      |               |             |                                                                                  | After F  | Repair Amou        | nt:  |                        |              |           |  |   |
|                                                                                                                                                                                                                                                                                                                                   |                               |          |          |                 |      |               | Title       | e Company Conta                                                                  | act Info | )                  |      |                        |              |           |  |   |
| Title Company Name:                                                                                                                                                                                                                                                                                                               |                               |          |          |                 |      |               |             | Title Company Address:                                                           |          |                    |      |                        |              |           |  |   |
| Title Agent:                                                                                                                                                                                                                                                                                                                      | tle Agent: Phone Number:      |          |          |                 |      |               | Email:      |                                                                                  |          |                    |      |                        |              |           |  |   |
|                                                                                                                                                                                                                                                                                                                                   |                               |          |          |                 |      |               |             |                                                                                  |          |                    |      |                        |              |           |  |   |
| I hereby certify that the above information is, to the best of my knowledge, true and accurate. I authorize Private Leverage, LLC and its affiliated agents, to run reports and verify the above information with the necessary agencies. I understand that loan approval will not result from the submission of the application. |                               |          |          |                 |      |               |             |                                                                                  |          |                    |      |                        |              |           |  |   |
| Borrower Sig                                                                                                                                                                                                                                                                                                                      | gnature:                      |          |          |                 |      |               |             |                                                                                  |          |                    |      | Date:                  |              |           |  |   |
| Co-Borrower S                                                                                                                                                                                                                                                                                                                     | Signature                     | :        |          |                 |      |               |             |                                                                                  |          |                    |      | Date:                  |              |           |  |   |
|                                                                                                                                                                                                                                                                                                                                   |                               |          |          |                 |      |               |             |                                                                                  |          |                    |      |                        |              |           |  |   |