

*Arlington Woods*

3785 Evanston Avenue  
Muskegon, Michigan 49442

Phone (231) 773-0843 Fax (231) 773-7250  
Arlingtonwoods.us

When applying for in house financing, please understand you are applying for a mortgage loan through our in house finance company, West Michigan Homes of Muskegon. Any false or misleading information given on this application will result in Mortgage fraud and is considered a federal offense.

All homes in Arlington Woods must be owner occupied and anyone applying as an Applicant or Co-Applicant must occupy the address they are applying for on the attached application.

Mortgage fraud is a crime in which the intent is to materially misrepresent or omit information on a mortgage loan application in order to obtain a loan or to obtain a larger loan than could have been obtained had the lender or borrower known the truth.

In United States federal courts, mortgage fraud is prosecuted as wire fraud, bank fraud, mail fraud, and money laundering, with penalties of up to thirty years' imprisonment.

Occupancy fraud is a scheme used by individuals to qualify for mortgage they would normally not qualify for. Occupancy fraud occurs when an applicant claims that the home will be owner-occupied to obtain favorable bank status when the property will not actually be occupied by the applicant. The applicant uses, or allows someone to use, his identity, credit score and income to obtain property for another buyer who may not qualify for a mortgage. These buyers are often used to cover up other forms and multiple layers of fraud.

By signing below, I/We fully understand that it is a Federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements concerning any of the above facts as applicable under the provisions of Title 18, United States Code, Section 1001, et seq. And that the Applicant and Co Applicant on this application will occupy the address I/We are applying for.

\_\_\_\_\_  
Applicant Name Printed

\_\_\_\_\_  
Co Applicant Name Printed

\_\_\_\_\_  
Applicant Signature                      Date

\_\_\_\_\_  
Co Applicant Signature                      Date

Arlington Woods  
arlingtonwoods.us  
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Muskegon, Michigan 49442  
Phone (231) 773-0843 Fax (231) 773-7250  
Email: officemanager@arlingtonwoods.us

**\$25 Application Fee**  
**Additional \$25 for each**  
**person over 18**  
**years age.**

#### APPLICANT INFORMATION

FIRST NAME: \_\_\_\_\_ M: \_\_\_\_\_ LAST: \_\_\_\_\_  
HOME PHONE: \_\_\_\_\_ CELL: \_\_\_\_\_  
D.L. #: \_\_\_\_\_ ST. ISSUED: \_\_\_\_\_  
D.O.B: \_\_\_\_\_ SSN: \_\_\_\_\_  
EMAIL: \_\_\_\_\_

#### APPLICANT ADDRESS HISTORY

(USE "PREVIOUS" SECTION IF LESS THAN 2 YEARS AT ANY ADDRESS)

CURRENT ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
OWN: \_\_\_\_\_ RENT: \_\_\_\_\_ RELATIVE: \_\_\_\_\_ OTHER: \_\_\_\_\_  
PAYMENT: \_\_\_\_\_ HOW LONG? YEARS \_\_\_\_\_ MONTHS \_\_\_\_\_  
LANDLORD: \_\_\_\_\_ PHONE: \_\_\_\_\_  
PREVIOUS ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
OWN: \_\_\_\_\_ RENT: \_\_\_\_\_ RELATIVE: \_\_\_\_\_ OTHER: \_\_\_\_\_  
PAYMENT: \_\_\_\_\_ HOW LONG? YEARS \_\_\_\_\_ MONTHS \_\_\_\_\_  
LANDLORD: \_\_\_\_\_ PHONE: \_\_\_\_\_

#### APPLICANT EMPLOYMENT HISTORY

(USE "PREVIOUS" SECTION IF LESS THAN 2 YEARS FOR EACH EMPLOYER)

CURRENT EMPLOYER: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
PHONE: \_\_\_\_\_  
HIRE DATE: \_\_\_\_\_ GROSS MO. INCOME: \_\_\_\_\_  
PREVIOUS EMPLOYER: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
PHONE: \_\_\_\_\_  
HIRE DATE: \_\_\_\_\_ GROSS MO. INCOME: \_\_\_\_\_

#### APPLICANT OTHER INCOME

(INCOME FROM ALIMONY, CHILD SUPPORT, ETC. NEED NOT BE REVEALED IF YOU DO NOT WISH THEM TO BE CONSIDERED AS A BASIS FOR PAYING THIS OBLIGATION)

MO. AMOUNT: \_\_\_\_\_ HOW LONG? \_\_\_\_\_ SOURCE: \_\_\_\_\_  
MO. AMOUNT: \_\_\_\_\_ HOW LONG? \_\_\_\_\_ SOURCE: \_\_\_\_\_  
MO. AMOUNT: \_\_\_\_\_ HOW LONG? \_\_\_\_\_ SOURCE: \_\_\_\_\_

#### CO-APPLICANT INFORMATION

FIRST NAME: \_\_\_\_\_ M: \_\_\_\_\_ LAST: \_\_\_\_\_  
HOME PHONE: \_\_\_\_\_ CELL: \_\_\_\_\_  
D.L. #: \_\_\_\_\_ ST. ISSUED: \_\_\_\_\_  
D.O.B: \_\_\_\_\_ SSN: \_\_\_\_\_  
EMAIL: \_\_\_\_\_

#### CO-APPLICANT ADDRESS HISTORY

(USE "PREVIOUS" SECTION IF LESS THAN 2 YEARS AT ANY ADDRESS)

CURRENT ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
OWN: \_\_\_\_\_ RENT: \_\_\_\_\_ RELATIVE: \_\_\_\_\_ OTHER: \_\_\_\_\_  
PAYMENT: \_\_\_\_\_ HOW LONG? YEARS \_\_\_\_\_ MONTHS \_\_\_\_\_  
LANDLORD: \_\_\_\_\_ PHONE: \_\_\_\_\_  
PREVIOUS ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
OWN: \_\_\_\_\_ RENT: \_\_\_\_\_ RELATIVE: \_\_\_\_\_ OTHER: \_\_\_\_\_  
PAYMENT: \_\_\_\_\_ HOW LONG? YEARS \_\_\_\_\_ MONTHS \_\_\_\_\_  
LANDLORD: \_\_\_\_\_ PHONE: \_\_\_\_\_

#### CO-APPLICANT EMPLOYMENT HISTORY

(USE "PREVIOUS" SECTION IF LESS THAN 2 YEARS FOR EACH EMPLOYER)

CURRENT EMPLOYER: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
PHONE: \_\_\_\_\_  
HIRE DATE: \_\_\_\_\_ GROSS MO. INCOME: \_\_\_\_\_  
PREVIOUS EMPLOYER: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
PHONE: \_\_\_\_\_  
HIRE DATE: \_\_\_\_\_ GROSS MO. INCOME: \_\_\_\_\_

#### CO-APPLICANT OTHER INCOME

(INCOME FROM ALIMONY, CHILD SUPPORT, ETC. NEED NOT BE REVEALED IF YOU DO NOT WISH THEM TO BE CONSIDERED AS A BASIS FOR PAYING THIS OBLIGATION)

MO. AMOUNT: \_\_\_\_\_ HOW LONG? \_\_\_\_\_ SOURCE: \_\_\_\_\_  
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ASSETS AND LIABILITIES

THIS STATEMENT AND ANY APPLICABLE SUPPORTING SCHEDULES MAY BE COMPLETED JOINTLY BY BOTH MARRIED AND UNMARRIED CO-BORROWERS IF THEIR ASSETS AND LIABILITIES ARE SUFFICIENTLY JOINED SO THAT THE STATEMENT CAN BE MEANINGFULLY AND FAIRLY PRESENTED ON A COMBINED BASIS; OTHERWISE, SEPARATE STATEMENTS AND SCHEDULES ARE REQUIRED.

WILL THIS SECTION BE COMPLETED \_\_\_JOINTLY \_\_\_NON JOINTLY

LIABILITIES AND PLEDGED ASSETS. LIST THE CREDITOR'S NAME, ADDRESS, AND ACCOUNT NUMBER FOR ALL OUTSTANDING DEBTS, INCLUDING AUTOMOBILE LOANS, REVOLVING CHARGE ACCOUNTS, REAL ESTATE LOANS, ALIMONY, CHILD SUPPORT, STOCK PLEDGES, ETC. USE CONTINUATION SHEET, IF NECESSARY. INDICATED BY (\*) THOSE LIABILITIES, WHICH WILL BE SATISFIED UPON SALE OF REAL ESTATE OWNED.

LIABILITIES DESCRIPTION MONTHLY PAYMENT \$ MONTHS LEFT BALANCE \$

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ASSET DESCRIPTION

CASH DEPOSIT TOWARD PURCHASE HELD BY

NAME AND ADDRESS OF BANK, S&L, OR CREDIT UNION

ACCOUNT NO. CASH OR MARKET VALUE \$

ASSET DESCRIPTION

CASH DEPOSIT TOWARD PURCHASE HELD BY

NAME AND ADDRESS OF BANK, S&L, OR CREDIT UNION

ACCOUNT NO. CASH OR MARKET VALUE \$

ASSET DESCRIPTION

CASH DEPOSIT TOWARD PURCHASE HELD BY

NAME AND ADDRESS OF BANK, S&L, OR CREDIT UNION

ACCOUNT NO. CASH OR MARKET VALUE \$

STOCKS & BONDS (CO. NAME/NUMBER & DESCRIPTION)

ACCOUNT NO. CASH OR MARKET VALUE \$

MONTHLY PAYMENT \$ MONTHS LEFT BALANCE \$

LIFE INSURANCE (CO. NAME/NUMBER & DESCRIPTION)

ACCOUNT NO. CASH OR MARKET VALUE \$

REAL ESTATE OWNED CASH OR MARKET VALUE \$

VESTED INTEREST IN RETIREMENT FUND CASH OR MARKET VALUE

\$

NET WORTH OF BUSINESS OWNED (ATTACH FINANCIAL STATEMENT) \$ NAME OF BUSINESS

ALIMONY/CHILD SUPPORT/SEPARATE MAINTENANCE PAYMENTS OWED TO: PER MO. \$

JOB-RELATED EXPENSES (CHILD CARE, UNION DUES, ETC.) PER MO. \$

OTHER ASSETS (ITEMIZE) \$

TOTAL MONTHLY PAYMENTS \$

A. TOTAL ASSETS \$ B. TOTAL LIABILITIES \$ NET WORTH (A. MINUS B.) \$

**ADDITIONAL OCCUPANTS OF HOME: Anyone over 18 years of age must sign below & agree to credit, criminal, rental & background checks**

NAME: \_\_\_\_\_ D.O.B: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_ SSN: \_\_\_\_\_ D.L# \_\_\_\_\_

NAME: \_\_\_\_\_ D.O.B: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_ SSN: \_\_\_\_\_ D.L# \_\_\_\_\_

NAME: \_\_\_\_\_ D.O.B: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_ SSN: \_\_\_\_\_ D.L# \_\_\_\_\_

NAME: \_\_\_\_\_ D.O.B: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_ SSN: \_\_\_\_\_ D.L# \_\_\_\_\_

I/we hereby declare that all statements made in this application are true and correct. I/we are applying for residence in the community named above. I/we hereby authorize the community and/or the community's manager to obtain a consumer report, and any information it deems necessary, for the purpose of evaluating my/or application. I/we agree that verification or re-verification of any information contained in this application may be made at any time by the community or community manager either directly or through a credit- reporting agency, criminal background check, employment/income verification, or landlord reference check. I/we understand that such information may include, but is not limited to, credit history, civil and criminal information, records of arrest, rental history, employment/salary details, vehicle records, licensing records, and/or any other information. I/we hereby expressly release the community, community's manager and any procurer or furnisher of such information, from any liability whatsoever in the use, procurement, or furnishing of such information, and understand that my/our application information may be provided to various local, state and/or federal government agencies, including without limitation various law enforcement agencies. I/we authorize the community and community's manager to provide a photocopy of this application to others to prove my/our authorization for the release of information by others. The community and community manager will rely on the information contained in this application; I/we agree to update the information if any material facts change prior to closing or occupancy. I/we authorize the Community and Community manager to release to third parties any information necessary to monitor the status of the insurance sold to me on my property. The Community, Community manager and/or one of their affiliates may earn a commission in connection with any insurance sold to me/us to the extent permitted by law. This application is not a contract, lease, or a home-site reservation and gives me/us no rights of tenancy, no rights to purchase a manufactured home and no rights to obtain any type of loan. I/we understand that, if Community or Community's manager cannot verify any of the information provided herein, this application may be denied. In addition, providing false information on this application may result in denial of the application or result in termination of tenancy.

**Certification:** I/we certify that the information provided in this application is true and correct as of the date set forth opposite my/our signature(s) on this application and acknowledge my/our understanding that any intentional or negligent misrepresentation(s) of the information contained in this application may result in civil liability and/or criminal penalties including, but not limited to, fine or imprisonment or both under the provisions of Title 18, United States Code, Section 1001, et seq. and liability for monetary damages to the Creditor, Community, Community manager or their agents, successors and assigns, insurers and any other person who may suffer any loss due to reliance upon any misrepresentations which I/we have made on this application.

Roommate Only Signature (over 18)

Date

Roommate Only Signature (over 18)

Date

Roommate Only Signature (over 18)

Date

Roommate Only Signature (over 18)

Date

**ANIMAL INFORMATION: (ONLY 1 ANIMAL IS ALLOWED PER HOUSEHOLD)****\*\*\*\*YOU MUST SUBMIT A PICTURE, SHOT RECORD AND LICENSE FOR THE ANIMAL\*\*\*\***

CAT OR DOG? \_\_\_\_\_ BREED: \_\_\_\_\_ COLOR: \_\_\_\_\_ NAME: \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION**

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

**VEHICLE INFORMATION**

(LIST ALL CARS, TRUCKS, RV'S, BOATS, TRAILERS, ETC)

YEAR: \_\_\_\_\_ COLOR: \_\_\_\_\_ MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_ PLATE NO: \_\_\_\_\_

YEAR: \_\_\_\_\_ COLOR: \_\_\_\_\_ MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_ PLATE NO: \_\_\_\_\_

YEAR: \_\_\_\_\_ COLOR: \_\_\_\_\_ MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_ PLATE NO: \_\_\_\_\_

YEAR: \_\_\_\_\_ COLOR: \_\_\_\_\_ MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_ PLATE NO: \_\_\_\_\_

**HOME INFORMATION****\*\*WILL THE ADDRESS YOU ARE APPLYING FOR BE YOUR PRIMARY RESIDENCE?** \_\_\_\_\_ YES or \_\_\_\_\_ NO

ADDRESS YOU ARE APPLYING FOR: \_\_\_\_\_ IS THE ADDRESS YOU ARE APPLYING FOR:

\_\_\_ VACANT LOT \_\_\_ HOME FOR SALE BY OWNER \_\_\_ NEW IN HOUSE FINANCED \_\_\_ USED IN HOUSE FINANCED \_\_\_ TAKE OVER PMTS.

\_\_\_ MOVE OVER \_\_\_ LOOKING \_\_\_ OTHER EXPLAIN \_\_\_\_\_

**ADDITIONAL INFORMATION (APPLICANT AND CO-APPLICANT)**

HAS ANY PERSON FILED BANKRUPTCY IN THE LAST 7 YEARS? YES or NO, IF YES, WHO? \_\_\_\_\_

HAD ANY JUDGEMENTS, REPOSSESSIONS, GARNISHMENTS, OR LEGAL PROCEEDINGS FILED AGAINST YOU IN THE LAST 7 YEARS? YES NO, IF YES WHO? \_\_\_\_\_

HAS ANY PERSON HAD A PROPERTY FORECLOSED ON IN THE LAST 7 YEARS? YES or NO IF YES WHO? \_\_\_\_\_

IS ANY PERSON A PARTY TO A LAWSUIT? YES or NO, IF YES, WHO? \_\_\_\_\_

HAS ANY PERSON BEEN CONVICTED OF A FELONY OR IS A REGISTERED SEX OFFENDER? YES or NO, IF YES WHO? \_\_\_\_\_

HAS EITHER PERSON EVER BEEN ASKED TO TERMINATE YOUR RESIDENCE OR EVER BEEN EVICTED? YES NO, IF YES WHO? \_\_\_\_\_

ADDITIONAL EXPLANATION: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\*\*\*PLEASE SUBMIT THE COMPLETED APPLICATION ALONG WITH THE FOLLOWING: You must supply proof of any income listed on application, minimum 2 years required.\*There may be additional items or information needed.

- paystubs (at least 1 month of income)
- Federal income tax returns (past 2 years) with all schedules & W2's/1099's
- If self-employed, last 2 years complete business tax returns for all businesses owned.
- Bank statement, checking and or savings.
- Picture identification for everyone over 18 years of age.
- Social security cards for everyone over 18 years of age.
- 

**ADDITIONAL COMMENTS:**  
I/we hereby declare that all statements made in this application are true and correct. I/we are applying for residence in the community named above. I/we hereby authorize the community and/or the community's manager to obtain a consumer report, and any information it deems necessary, for the purpose of evaluating my/or application. I/we agree that verification or re-verification of any information contained in this application may be made at any time by the community or community manager either directly or through a credit- reporting agency, criminal background check, employment/income verification, or landlord reference check. I/we understand that such information may include, but is not limited to, credit history, civil and criminal information, records of arrest, rental history, employment/salary details, vehicle records, licensing records, and/or any other information. I/we hereby expressly release the community, community's manager and any procurer or furnisher of such information, from any liability whatsoever in the use, procurement, or furnishing of such information, and understand that my/our application information may be provided to various local, state and/or federal government agencies, including without limitation various law enforcement agencies. I/we authorize the community and community's manager to provide a photocopy of this application to others to prove my/our authorization for the release of information by others. The community and community manager will rely on the information contained in this application; I/we agree to update the information if any material facts change prior to closing or occupancy. I/we authorize the Community and Community manager to release to third parties any information necessary to monitor the status of the insurance sold to me on my property. The Community, Community manager and/or one of their affiliates may earn a commission in connection with any insurance sold to me/us to the extent permitted by law. This application is not a contract, lease, or a home-site reservation and gives me/us no rights of tenancy, no rights to purchase a manufactured home and no rights to obtain any type of loan. I/we understand that, if Community or Community's manager cannot verify any of the information provided herein, this application may be denied. In addition, providing false information on this application may result in denial of the application or result in termination of tenancy.  
**Certification:** I/we certify that the information provided in this application is true and correct as of the date set forth opposite my/our signature(s) on this application and acknowledge my/our understanding that any intentional or negligent misrepresentation(s) of the information contained in this application may result in civil liability and/or criminal penalties including, but not limited to, fine or imprisonment or both under the provisions of Title 18, United States Code, Section 1001, et seq. and liability for monetary damages to the Creditor, Community, Community manager or their agents, successors and assigns, insurers and any other person who may suffer any loss due to reliance upon any misrepresentations which I/we have made on this application.

Applicant's signature

Date

Co-Applicant's signature

Date

**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 either on the basis of this information, or 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 do not furnish ethnicity, race, or ex, under Federal regulation, this lender is required to note the information on the basis of visual observation and surname if you have made this application in person. 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.)

| APPLICANT  | CO-APPLICANT   |
|--|--|
| <b>ETHNICITY</b>   | <b>ETHNICITY</b>   |
| <input type="checkbox"/> I DO NOT WISH TO FURNISH THIS INFORMATION   | <input type="checkbox"/> I DO NOT WISH TO FURNISH THIS INFORMATION   |
| <input type="checkbox"/> HISPANIC OR LATINO <input type="checkbox"/> NOT HISPANIC OR LATINO                                  | <input type="checkbox"/> HISPANIC OR LATINO <input type="checkbox"/> NOT HISPANIC OR LATINO                                  |
| <b>RACE</b>  | <b>RACE</b>  |
| <input type="checkbox"/> AMERICA INDIAN OR ALASKA NATIVE   | <input type="checkbox"/> AMERICA INDIAN OR ALASKA NATIVE   |
| <input type="checkbox"/> NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER   | <input type="checkbox"/> NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER   |
| <input type="checkbox"/> ASIAN <input type="checkbox"/> WHITE  | <input type="checkbox"/> ASIAN <input type="checkbox"/> WHITE  |
| <input type="checkbox"/> BLACK OR AFRICAN AMERICAN   | <input type="checkbox"/> BLACK OR AFRICAN AMERICAN   |
| <b>SEX</b>   | <b>SEX</b>   |
| <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE  | <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE  |
| <b>MARITAL STATUS</b>  | <b>MARITAL STATUS</b>  |
| <input type="checkbox"/> MARRIED <input type="checkbox"/> / <input type="checkbox"/> / <input type="checkbox"/> DATE MARRIED | <input type="checkbox"/> MARRIED <input type="checkbox"/> / <input type="checkbox"/> / <input type="checkbox"/> DATE MARRIED |
| <input type="checkbox"/> UNMARRIED (INCLUDES NEVER MARRIED, DIVORCED & WIDOWED)  | <input type="checkbox"/> UNMARRIED (INCLUDES NEVER MARRIED, DIVORCED & WIDOWED)  |
| <input type="checkbox"/> SEPARATED (LEGALLY)   | <input type="checkbox"/> SEPARATED (LEGALLY)   |

PREVIOUS NAMES/MAIDEN NAME

PREVIOUS NAMES/MAIDEN NAME

CURRENT ARLINGTON RESIDENT THAT REFERRED YOU?

FULL NAME AND PHONE NO.