



7644 N. Palm Ave Fresno, CA 93711 Ph: (559) 432-8221 | Toll Free: (888) 891-8221 Fax: (559) 432-8298

[Investor Portal](#)

Investor Registration Form

Lender & Vesting

Full Name of Lending Entity(*to hold title*) _____

Tax I.D # **or** Social Security # _____

Title to be held as _____
(i.e. Husband and Wife as Joint Tenants, Community Property, Married Sole and Separate, A single Man or Woman, A Corporation, Trust)

Investor First Name _____ M.I. _____ Last Name _____

Date of Birth: _____ Title: _____
(If Corp or Partnership or Trust or Co)

Co-Investor First Name _____ M.I. _____ Last Name _____

Date of Birth: _____ Title: _____
(If Corp or Partnership or Trust or Co)

FOR TRUSTS (Provide a Copy of the Trust Agreement) FOR CORPORATIONS (Provide Articles & Minutes Naming Officers/Signers)

Mailing Address

Street _____

City _____ State _____ Zip _____

Contact and Telephone Information

Investor Primary/Cell (_____) _____ Business (_____) _____

Co-Investor Primary/Cell (_____) _____ Business (_____) _____

Fax (_____) _____

Investor E-Mail: _____
(Required for Digital Signatures, Online Access and Communication)

Co-Investor E-Mail: _____
(Required for Digital Signatures, Online Access and Communication)

To Obtain Interest on Investment by check:

Name check payable to: _____

Address to send Check: _____

OR BY

Automatic Deposit Information

Routing Number # _____

*** (please get actual Routing from the bank as it may be different from deposit ticket or check)

Account Number # _____

Account Type (please check one) Checking ☐ Savings ☐ *** (only 2 choices)

Name on Account _____

Online Access to your Investment Portfolio Available by request only **please check one:** Yes ☐ No ☐

Servicing Agreements - Preferred Method of Signing

Please select how you would prefer to sign *Servicing Agreements and Disclosures* (one document per loan you are invested in). **Please "X" one option**

- ☐ Digital Signing (electronic signature)
- ☐ Email (investor will need to return via email/fax/in office)
- ☐ Mail (including return envelope with paid postage)
- ☐ Sign in Person (front desk will call when available)

Would you like to receive a copy of these servicing agreements after signing? **please check one:** Yes ☐ or No ☐

These options can be changed at any time. If there are any questions or concerns with servicing agreements and disclosures, please don't hesitate to call the front desk at (559) 432-8221

New Investor Signature

Investor Signature: _____ Date _____

Co- Investor Signature: _____ Date _____