



INVESTOR CRITERIA FORM

In order for us to assist you with your specific investment needs, please complete the following investor criteria questionnaire.

Preferred Property Type Investment

- Apartment Mobile Home Park Retail
- Office Industrial Other

Quality of Property A B C D

Value added (deferred issues) Yes No

No defer Maintenance Yes No

Age of Property _____

How can our investors help you with your current investment property needs?

Check all that apply:

- Market Analysis Property Appraisal
- Financing Rates & Terms Property Management
- Asset Evaluation Alternative Investment
- Reallocation Legal Questions
- Tax Questions

Property Details

City /County / State _____

Current Cap Rate _____ Projected Cap Rate _____

Price Per Sq.Ft. _____ Down Payment Amount _____

Leverage %: _____ Length of Holding Period/yrs. _____

Other Comments: _____

Deal Size (price in millions of dollars) _____

Please provide us with your information. *It will remain confidential*

Name _____

Address _____

City / State / Zip _____

Phone / Fax _____

E-Mail _____

Fax to: 714-968-1199 or Mail this form to the address above.