

Courtlandt1031

INSTRUCTIONS: Please fill out this document and fax to 949-251-6911. Alternately, you can scan and email it to investorrelations@courtlandtgroup.com. Leave any section blank if you do not have the information available.

Acquisition Criteria Form

1. Is the acquisition going to be used to complete a 1031 tax deferred exchange?

Yes _____ No _____

If no, please proceed to question # 7.

2. My downleg property will/has close(d) on: _____

3. The exchange proceeds will be: _____

4. The debt to replace will be: _____

5. The type of real estate being sold is:

- a. Apartments
- b. Commercial/Retail
- c. Office
- d. Industrial
- e. Land
- f. Other _____

The address of the property is:

(City, State).

6. Any additional information about your downleg property you would like to share: _____

7. Are you a licensed real estate professional? _____

8. I will be working with the following real estate brokerage to sell my Property: _____

Agent: _____ Phone: _____

9. My past real estate experience includes:

a. Types owned: _____

b. Years owned: _____

10. The type of real estate I will consider for acquisition includes: (Please rank with 1 being the most favorable choice to 5 your least favorable.)

Apartments	1	2	3	4	5
Retail	1	2	3	4	5
Office	1	2	3	4	5
Industrial	1	2	3	4	5
Land	1	2	3	4	5
Other: _____					

Ranking: _____

11. My initial annual cash on cash return expectation is _____ %.

12. Investment strategy preferred:

- a. Income (NNN, Restaurants, Single Use)
- b. Growth (Land, Development)
- c. Stabilized (High Current Occupancy)
- d. Value added (Improve/Renovate)

13. The amount of Exchange equity: _____
(Range)

Additional Equity Capital: _____
(Range)

Loan to value: _____
(Range)

Total Purchase Price: _____
(Range)

14. Financing terms _____

15. The anticipated holding period of the property would be _____ years.

16. The overall annualize return expectation (cash flow plus appreciation) is _____ %.

17. The geographic areas of interest for investing I would consider is/are: _____

18. Other Information: (unit size or mix, debt coverage ratio, tenant type or size, etc.) _____

I believe this information to be accurate and represent my goals and objectives.

Name (Print)

Name (Signed)

Date

Address

Phone

Fax

E-mail