

NDG VACANT HOME REFERRAL FORM



Complete & Fax To: 512-279-2132

\$50 Incentive

REFERRING DATE: _____

REFERRING PERSON CONTACT INFORMATION:

NAME: _____

STREET: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

PHONE CONTACT NUMBER(S):

EMAIL: _____

VACANT HOME MOVE-IN DATE _____

VACANT HOME INFORMATION:

STREET: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

HOMEOWNER CONTACT INFORMATION:

NAME: _____

STREET: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

PHONE CONTACT NUMBER(S):

EMAIL: _____

_____ **Property#** _____

Authorized
November Design Group, Inc.

Note: Incentive is paid on the first of the month following 30 days of a Resident Home Stager being placed in the referred vacant home.