



Making That Property REAL! (Real Estate Services)

PREQUALIFICATION

1. PERSONAL INFORMATION

BORROWER: First Name _____	CO-BORROWER First Name _____
M.I. Last Name _____	M.I. Last Name _____
Address _____	Address _____
City _____ State _____ Zip _____	City _____ State _____ Zip _____
How long have you lived at this address? Years _____ Months _____	How long have you lived at this address? Years _____ Months _____
Do you Own <input type="checkbox"/> Rent <input type="checkbox"/> Rent/Mortgage \$ _____	Do you Own <input type="checkbox"/> Rent <input type="checkbox"/> Rent/Mortgage \$ _____
Value (if Owned) \$ _____ Will you Rent <input type="checkbox"/> Sell <input type="checkbox"/>	Value (if Owned) \$ _____ Will you Rent <input type="checkbox"/> Sell <input type="checkbox"/>
If you have lived at this address less than 5 years, state previous	If you have lived at this address less than 5 years, state previous
Address _____	Address _____
City _____ State _____ Zip _____	City _____ State _____ Zip _____
How long have you lived at this address? Years _____ Months _____	How long have you lived at this address? Years _____ Months _____
D.O.B _____ SSN - - _____	D.O.B _____ SSN - - _____
Cell Ph _____ Home Ph _____	Cell Ph _____ Home Ph _____
Work Ph _____ Married <input type="checkbox"/> Yes <input type="checkbox"/> No	Work Ph _____ Married <input type="checkbox"/> Yes <input type="checkbox"/> No
Do you pay Alimony or child support? \$ _____	Do you pay Alimony or child support? \$ _____
Filed Bankruptcy in last 7 years? <input type="checkbox"/> Yes <input type="checkbox"/> No	Filed Bankruptcy in last 7 years? <input type="checkbox"/> Yes <input type="checkbox"/> No
If you filed bankruptcy, state the Discharge Date _____	If you filed bankruptcy, state the Discharge Date _____
US Citizen <input type="checkbox"/> Permanent Resident <input type="checkbox"/> Non-Permanent Res <input type="checkbox"/>	US Citizen <input type="checkbox"/> Permanent Resident <input type="checkbox"/> Non-Permanent Res <input type="checkbox"/>

2. EMPLOYMENT INFORMATION

Borrower Employer	Co-Borrower Employer
Address _____	Address _____
City _____ State _____ Zip _____	City _____ State _____ Zip _____
Self-Employed <input type="checkbox"/> Yes <input type="checkbox"/> No Position _____	Self-Employed <input type="checkbox"/> Yes <input type="checkbox"/> No Position _____
How long at current employment _____	How long at current employment _____
Annual Income \$ _____	Annual Income \$ _____
Previous Employer _____	Previous Employer _____
Address _____	Address _____
City _____ State _____ Zip _____	City _____ State _____ Zip _____

3. DOWNPAYMENT AND BANKING INFORMATION

Checking \$ _____	Savings \$ _____	Retirement/401K \$ _____
Proceeds from Sale \$ _____	Gift \$ _____	Others (State) \$ _____

4. LOAN INFORMATION

Property Address _____	City _____ State _____ Zip _____
Property Type <input type="checkbox"/> SFR <input type="checkbox"/> PUD <input type="checkbox"/> Condo <input type="checkbox"/> 2-4 unit <input type="checkbox"/> Attached <input type="checkbox"/> Detached	
Sales Price/Estimated Value \$ _____	Program <input type="checkbox"/> ARM <input type="checkbox"/> Fixed <input type="checkbox"/> HELOC/2 nd
Loan Amount 1 st \$ _____	Loan Amount 2 nd \$ _____
Occupancy <input type="checkbox"/> Owner <input type="checkbox"/> 2 nd Home <input type="checkbox"/> Investment	Purpose <input type="checkbox"/> Purchase <input type="checkbox"/> R&T Refi <input type="checkbox"/> Cash-Out
Interest Only <input type="checkbox"/> Yes <input type="checkbox"/> No	Pre-Pay <input type="checkbox"/> Yes <input type="checkbox"/> No if YES no of years _____
If REFI, current Rate _____ Loan Program _____	Tax & Insurance impounds <input type="checkbox"/> Yes <input type="checkbox"/> No
Doc Type <input type="checkbox"/> Full <input type="checkbox"/> Stated Income <input type="checkbox"/> Stated income/Stated Assets <input type="checkbox"/> No Ratio <input type="checkbox"/> No Doc	
If a REFI, what will the loan accomplish <input type="checkbox"/> Lower rate/payment <input type="checkbox"/> Home Improvement <input type="checkbox"/> Payoff debt	

5. LOAN REPRESENTATIVE (To be completed by a representative)

Name _____	Contact Phone # _____	Cell Phone# _____
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