

PRE-QUALIFICATION FORM

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HOW DID YOU HEAR ABOUT US? _____

TODAY'S DATE: _____

REFERRED BY: _____

BORROWER: _____

CO-BORROWER: _____

ADDRESS: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

CITY: _____ STATE: _____ ZIP: _____

YOU CURRENTLY: OWN RENT # OF YEARS: _____

OWN RENT # OF YEARS: _____

SS#: _____

SS#: _____

HOME PHONE #: _____

HOME PHONE #: _____

CELL PHONE #: _____

CELL PHONE #: _____

DATE OF BIRTH: _____

DATE OF BIRTH: _____

MARITAL STATUS: Married Single Divorced

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If married, what is full name of spouse? _____

RESIDENCY STATUS:

US CITIZEN RESIDENT ALIEN OTHER

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US CITIZEN RESIDENT ALIEN OTHER

BORROWER EMPLOYMENT STATUS:

SELF-EMPLOYED WAGE EARNER

NAME OF EMPLOYER: _____

EMPLOYER'S ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

POSITION: _____

TYPE OF BUSINESS: _____

OF YEARS ON THE JOB: _____

GROSS MONTHLY INCOME: \$ _____

CO-BORROWER EMPLOYMENT STATUS:

SELF-EMPLOYED WAGE EARNER

NAME OF EMPLOYER: _____

EMPLOYER'S ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

POSITION: _____

TYPE OF BUSINESS: _____

OF YEARS ON THE JOB: _____

GROSS MONTHLY INCOME: \$ _____

PREVIOUS WORK HISTORY (IF PRESENT LESS THAN TWO YEARS): _____

PLEASE FILL OUR EITHER "PURCHASE" OR "REFINANCE" SECTION BELOW

PROPERTY IS: RESIDENTIAL COMMERCIAL RAW/UNDEVELOPED LAND

IF RESIDENTIAL, PROPERTY WILL BE: PRIMARY RESIDENCE SECOND HOME INVESTMENT PROPERTY

TYPE OF PROPERTY: SINGLE FAMILY HOME APARTMENT CONDO TOWNHOUSE OTHER

PURCHASE PURCHASE PRICE: \$ _____ FIRST TIME HOMEBUYER? YES NO

DOWN PAYMENT: \$ _____ SOURCE OF DOWN PAYMENT: _____

REFINANCE RATE & TERM ONLY CASH-OUT DEBT CONSOLIDATION

LOAN AMOUNT: \$ _____ ESTIMATED HOME VALUE \$ _____

IS THERE A FIRST AND A SECOND MORTGAGE? YES NO

TOTAL MORTGAGE DEBT: \$ _____ CURRENT MORTGAGE PAYMENT(S): \$ _____

MINIMUM MONTHLY PAYMENTS ON ALL REVOLVING AND INSTALLMENT DEBTS: \$ _____

(Please only include cars, boats, credit cards and any other loans with set monthly payment)

DO YOU PREFER TO PAY TAXES AND INSURANCE: MONTHLY (ESCROWED) YEARLY (NOT-ESCROWED)

MAXIMUM DESIRED MONTHLY PAYMENT (TAXES & INSURANCE INCLUDED): \$ _____

LIQUID ASSETS - PLEASE INCLUDE: ALL CHECKING, SAVINGS, MONEY MARKET, MUTUAL FUNDS, IRA, RETIREMENT ACCOUNTS, STOCKS, BONDS, ETC. – ATTACH ADDITIONAL PAPER IF NECESSARY.

(1) BANK/INSTITUTION NAME: _____ TYPE OF ACCOUNT: _____
APPROX. BALANCE: \$ _____ HOW LONG HAVE YOU HAD THIS ACCOUNT: _____

(2) BANK/INSTITUTION NAME: _____ TYPE OF ACCOUNT: _____
APPROX. BALANCE: \$ _____ HOW LONG HAVE YOU HAD THIS ACCOUNT: _____

(3) BANK/INSTITUTION NAME: _____ TYPE OF ACCOUNT: _____
APPROX. BALANCE: \$ _____ HOW LONG HAVE YOU HAD THIS ACCOUNT: _____

(4) BANK/INSTITUTION NAME: _____ TYPE OF ACCOUNT: _____
APPROX. BALANCE: \$ _____ HOW LONG HAVE YOU HAD THIS ACCOUNT: _____

PROPERTIES OWNED:

<u>OO/2ND/INVEST</u>	<u>MORTGAGE AMOUNT</u>	<u>PAYMENTS</u>	<u>RENTAL INCOME (IF INVEST)</u>
_____	_____	_____	_____
_____	_____	_____	_____

BANKRUPTCY: YES NO IF YES, WHAT CHAPTER? _____

WAS IT DISCHARGED OR DISMISSED? PLEASE PROVIDE DATE: _____

FORECLOSURE: YES NO IF YES, DISCHARGED OR DISMISSED? PLEASE PROVIDE DATE: _____

CHILD SUPPORT: YES NO IF YES, HOW MUCH DO YOU PAY MONTHLY? _____

ALIMONY: YES NO IF YES, HOW MUCH DO YOU PAY MONTHLY? _____

By signing below I hereby authorize United Home Mortgage Center, Inc. to pull my credit report. The information obtained on this document is only to be used in the processing of my loan.

BORROWER'S SIGNATURE

CO- BORROWER'S SIGNATURE

PRINTED NAME

PRINTED NAME

DATE

DATE

PLEASE FAX COMPLETED FORM TO 305.969.1229 – ATTN: BRIAN ROKAW