

Mortgage+Care

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Please contact us at (800)481-2708 or www.mortcare.com for a list of mergeable documents.

BORROWER INFORMATION

BORROWER : FIRST NAME MIDDLE NAME LAST NAME

COBORROWER: _____

MANNER IN WHICH TITLE WILL BE HELD : _____

PRESENT ADDRESS * _____

ADDRESS LINE 2 : _____

PHONE NUMBERS WORK : _____

PHONE NUMBER HOME : _____

EMAIL : _____

CITY : _____

STATE : _____ ZIP: _____

SOCIAL SECURITY # : _____

SUBJECT PROPERTY ADDRESS : _____

CITY, STATE ZIP : _____

APN # " _____

	BORROWER	CO-BORROWER (S)
EMPLOYER	: _____	_____
JOB TITLE	: _____	_____
YEARS ON THE JOB	: _____	_____
AGE	: _____	_____
COBORROWER 2	: _____	_____
COBORROWER 3	: _____	_____
COBORROWER 4	: _____	_____
COBORROWER 5	: _____	_____

COLLATERAL PROP. ADDRESS 2: _____

COLLATERAL PROP. DESCRIPTION 2: _____

COLLATERAL PROP. ADDRESS 3: _____

COLLATERAL PROP. DESCRIPTION 3: _____

INCOME

EXPENSES

BORROWER

GROSS SALARY \$ _____
INTEREST \$ _____
DIVIDENDS \$ _____
GROSS RENTAL INCOME \$ _____
MISC. INCOME \$ _____

RENT \$ _____
CHARGE ACCOUNTS / CARDS \$ _____
MORTGAGE PAYMENTS (PITI) \$ _____
SPOUSE / CHILD SUPPORT \$ _____
LIFE INSURANCE \$ _____

CO-BORROWER(S) :

GROSS SALARY \$ _____
INTEREST \$ _____
DIVIDENDS \$ _____
GROSS RENTAL INCOME \$ _____
MISC. INCOME \$ _____

VEHICLE LOAN \$ _____
288 \$ _____

TOTAL INCOME \$ _____

TOTAL EXPENSES \$ _____

SUBORDINATION PROVISIONS

BUSINESS ENTITY

_____ DATE OF BALANCE SHEET _____
INCOME STATEMENT (FROM - TO) _____
AUDITED BY CPA / PA (Y/N)? Y _____ N _____
BANKRUPTCY HAS BANKRUPTCY BEEN DISCHARGED? Y _____ N _____

DELINQUENT ENCUMBRANCES

NUMBER OF DELINQUENT PAYMENTS IN LAST 12 MONTHS # _____
NATURE OF ENCUMBRANCES (1ST, 2ND, ETC..) _____
BALANCE OF ENCUMBRANCES \$ _____
OTHER SOURCE OF FUNDS TO CURE _____
TOTAL AMOUNT OF DELINQUENCIES \$ _____
NEEDED TO CURE IF STILL DELINQUENT \$ _____
PROCEEDS OF THIS LOAN CURE DELINQUENCIES? _____ N _____

LOAN INFORMATION

LOAN AMOUNT \$ _____ INTEREST RATE : _____ TERM : _____ MONTHS
DEED POSITION (1ST, 2ND, ETC.): _____ <F>IXED, _____ / <A>DJUSTABLE : _____
LOAN TYPE <P>URCHASE _____, <R>EFI, _____, <N>EW _____
AMORTIZATION TYPE <A>MORTIZED _____, <I>NT ONLY _____ <P>ARTIAL _____
MONTHLY PAYMENT \$ _____
BALLOON AMOUNT \$ _____ MONTHS UNTIL BALLOON PAYMENT : _____
LATE CHARGE % _____ LATE CHARGE \$ _____ GRACE DAYS _____
IS THIS A DEPARTMENT OF CORPORATIONS LOAN _____

IS THERE A PREPAYMENT PENALTY ? Y _____ N _____

DATE OPENED : _____ DOCUMENT DATE : _____

DATE FUNDED : _____ CLOSING DATE : _____

1ST PAYMENT DATE : _____ FINAL PMT DATE : _____

STEP RATE LOAN:

DESCRIPTION	RATE1	RATE2	RATE3	RATE 4
START DATE	_____	_____	_____	_____
RATE %	_____	_____	_____	_____
TERM (MONTHS)	_____	_____	_____	_____
PAYMENT \$	_____	_____	_____	_____

OUTSIDE SERVICING AGENCY INFO:

SERVICING AGENCY NAME _____

SERVICING AGENCY PHONE _____

SERVICING AGENCY STREET _____

SERVICING AGENCY CITY, STATE, ZIP _____

SERVICING AGENCY RELATION TO BROKER _____

PROPERTY INFORMATION

APPRAISED VALUE \$ _____ DATE OF APPRAISAL : / _____ BROKER'S EST. VALUE \$ _____

SALES PRICE \$ _____ OWNER OCCUPIED ? Y _____ N _____

DOES THE PROPERTY GENERATE INCOME ? Y _____ N _____

DESCRIBE IMPROVEMENTS : _____

INFO SOURCE - ORROWER _____, <A>PPRAISAL _____, <O>THER _____ AGE : _____

TAXES \$ _____ TAXES DELINQUENT \$ _____

SUBJECT PROPERTY COUNTY : _____

TAX INFO. SOURCE : _____ PRELIM DATE _____

EXCEPTIONS TO PRELIM INCLUDED _____

EXCEPTIONS TO PRELIM EXCLUDED _____

APPRAISER : _____ PHONE # : _____

COMPANY : _____ RELATIONSHIP : _____

STREET : _____ CITY, STATE : _____

GROSS ANNUAL INCOME : \$ _____ NET ANNUAL INCOME : \$ _____

ITEMS PAYABLE IN CONNECTION WITH LOAN

_____ % POINTS TO BROKER _____
LENDER'S LOAN ORIGATION* _____
LENDER'S DISCOUNT FEE * _____
APPRAISAL _____
CREDIT REPORT _____
LENDER'S INSPECTION * _____
PROCESSING FEE _____
UNDERWRITING FEE * _____
WIRE TRANSFER * _____
TAX SERVICE FEE _____

ITEMS TO BE PAID IN ADVANCE

INTEREST FOR _____ DAYS @ _____ _____
MORTGAGE INSURANCE PREMIUMS _____
HAZARD INSURANCE PREMIUMS _____
COUNTY PROPERTY TAXES _____
VA FUNDING FEE * _____

RESERVES DEPOSITED WITH LENDER

HAZARD INSURANCE _____ MOS. @ _____ _____
MORTGAGE INS.* _____ MOS. @ _____ _____
PROPERTY TAXES _____ MOS. @ _____ _____

TITLE CHARGES

SETTLEMENT OR CLOSING/ESCROW _____
DOCUMENT PREPARATION _____
NOTARY FEE _____
TITLE INSURANCE _____

GOVERNMENT RECORDING AND TRANSFER

RECORDING _____
CITY/COUNTY TAX/STAMPS* _____

ADDITIONAL SETTLEMENT CHARGES

PEST INSPECTION * _____
BENEFICIARY STATEMENT FEE _____

RECONVEYANCE FEE

ADDITIONAL COMPENSATION FROM LENDER *

SUBTOTAL LOAN FEES PAID TO

ADDITIONAL PAYOFFS EG CREDIT CARDS

1: _____

2: _____

3: _____

4: _____

PAYMENT OF OTHER OBLIGATIONS

CREDIT LIFE, DISABILITY INSURANCE

PAYOFF OF EXISTING LOANS

AMOUNT TOTAL FROM ENCUMBRANCES

COMMERCIAL BORROWER INFO:

BORROWER CORPORATE NAME _____

1 ST DIRECTOR OR MEMBER NAME _____

2 ND DIRECTOR OR MEMBER NAME _____

3 RD DIRECTOR OR MEMBER NAME _____

4 TH DIRECTOR OR MEMBER NAME _____

CORP. OFFICER 1 NAME _____

CORP. OFFICER 2 NAME _____

CORP. OFFICER 3 TITLE _____

CORP. OFFICER 4 TITLE _____

GUARANTOR 1 NAME _____

ADDRESS _____

GUARANTOR 2 NAME _____

ADDRESS _____

ADDITIONAL PROPERTY INFO:

PROPERTY NAME _____

ANCHOR COMPANY _____

	NAME AND TITLE	ADDRESS
TENANT 1	_____	_____
TENANT 2	_____	_____

IMPROVEMENTS _____

ARKING SPACES _____

CONTRACTOR INFO:

CONTRACTOR NAME _____

ADDRESS _____

BANK NAME _____

BANK ADDRESS _____

CITY, STATE, ZIP _____

ACCT NAME _____

EST. COST OF CONSTRUCTION AFTER LOAN COST _____

NON REFUNDABLE FEE AMOUNT _____

FUN CONTROL FEE % _____