Date: Youngest Borrower Name: DOB: Oldest Borrower Name: _____ DOB: _____ Borrower's Phone Number: Borrower's Email: Property Address: Lien(s): \$______ Est. Value: \$_____ Needs: \$_____ Goals:_____ Alt Contact: _____ Relationship: _____ Alt Contact Phone: _____ Alt Contact Email: REFERRAL INFORMATION Referred by: ______Title _____ Phone: / email entered in RV: PROPERTY INFORMATION -Circle One: Single Family Home Condo Other Prop Tax Amt: Current? Y / N HOI Amt: Current? Y/N HOA Amt: Current? Y/N IF CONDO: HOA name/address/phone_____ IF CONDO: Mgmt Co name/address/phone_____ TITLE (circle one): Individual Joint Living Trust AB Trust Irrevocable Trust Other _____ **NOTES** Initials Date | Action

BORROWER INFORMATION

For a personalized, complimentary proposal, please Email:

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