New Client Information & Intake Package

First Name:	Last Nam	e:
Cell Phone:	Home Phone	
Email:	Fax nur	mber:
Mailing Address:		
Gross Monthly Income: \$		Gross Monthly Expenses: \$
Co-Borrower Information:		
		e:
	Home Phone	
		number:
Property Address:		
Orace Marthurlaneau C		Cross Marshly Fire areas C
Property Information: (Circle C		Gross Monthly Expenses: \$
Occupancy: Primary Residence 2 Property Type: SRF Condo PUD		
Do you own more than one hor	ne? If yes, how many	?
What is the value of your home	today?	
What is/are your current Mor	t gage Scenarios? (Cil	rcle One)
1st Lien Loan Type: Fixed Arm Int 3 year Arm 5 year Arm 7 year Ar		n Arm Other
Term of Loan 30 years 15 years	10 due in 30 50 due ir	30
Loan Balance: \$	Rate	Loan No
Current Lender:	·	
2nd Lien: Loan Type: Fixed HELC	C Interest Only Other	·
Term of Loan 30 years 15 years 2	L5 due in 30	
Loan Balance: \$	Rate	Loan No
Current Lender:		
H.O.A. Fee (if applicable): \$	Is HOA current? (Y/N	I)Are taxes & insurnace included in your mortgage payment? (Y/N)
Please check off ALL Hardship Items that	apply: () Divorce, () Unem	ployment, () Business Failure, () Illness, () Death of Spouse, () Payment
Increase, () Other ~ explain:		
		foreclosure notice? (Y / N) Is a hearing or sale date scheduled? (Y / N)
bo you want to stay in the property? (Y / I		r rent or sale? (Y/N) Is the property currently vacant? (Y/N) Is the