



## LOAN APPLICATION

### Property Information

SUBJECT PROPERTY ADDRESS	PROPERTY DESCRIPTION
<p>Street Address _____</p> <p>City _____ State _____ Zip _____</p>	<p> <input type="checkbox"/> SFR                      <input type="checkbox"/> Commercial                      <input type="checkbox"/> Vacant Land  <input type="checkbox"/> New Construction                      <input type="checkbox"/> Apartments/Duplex  <input type="checkbox"/> Mobile Home on Permanent Foundation            Date Purchased: _____ Purchase Price: _____            Year Built: _____ Owner's Est. Value: _____         </p>

### COMPLETE IF CONSTRUCTION

Year Acquired Lot	Original Cost	Amount of Existing Liens	(a) Present Value of Lot	(b) Cost of Improvements	Total (a+b)
\$	\$	\$	\$	\$	\$

### PURPOSE OF LOAN

Loan Amount Requested: \$ \_\_\_\_\_

#### BORROWER

Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

SS# \_\_\_\_\_ D.O.B. \_\_\_\_\_

Marital Status:     Married                       Separated  
 Unmarried (inc. single, divorced, widowed)

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone    (\_\_\_\_) \_\_\_\_\_

Mobile Phone    (\_\_\_\_) \_\_\_\_\_

Bus. Phone    (\_\_\_\_) \_\_\_\_\_

Occupation/Position \_\_\_\_\_  Self employed

Current Employer \_\_\_\_\_ Yrs. on Job \_\_\_\_\_

Street Address of Employer \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

#### CO-BORROWER

Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

SS# \_\_\_\_\_ D.O.B. \_\_\_\_\_

Marital Status:     Married                       Separated  
 Unmarried (inc. single, divorced, widowed)

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone    (\_\_\_\_) \_\_\_\_\_

Mobile Phone    (\_\_\_\_) \_\_\_\_\_

Bus. Phone    (\_\_\_\_) \_\_\_\_\_

Occupation/Position \_\_\_\_\_  Self employed

Current Employer \_\_\_\_\_ Yrs. on Job \_\_\_\_\_

Street Address of Employer \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_



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<b>SOURCES OF INCOME</b> <small>(List and identify each source separately)</small>	<b>Monthly Amt.</b>	<b>SOURCES OF INCOME CO-BOR</b> <small>(List and identify each source separately)</small>	<b>Monthly Amt.</b>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
<b>Total Monthly Income</b>	\$ _____	<b>Total Monthly Income</b>	\$ _____

<b>EXISTING MORTGAGE INFORMATION</b>					
<b>NAME OF FIRST MORTGAGE</b>		<b>Phone</b>	<b>NAME OF SECOND MORTGAGE</b>		<b>Phone</b>
_____		_____	_____		_____
<b>Principal Balance</b>	<b>Interest Rate</b>	<b>Regular Payment</b>	<b>Principal Balance</b>	<b>Interest Rate</b>	<b>Regular Payment</b>
\$ _____	<input type="checkbox"/> Fixed <input type="checkbox"/> ARM _____ %	\$ _____	\$ _____	<input type="checkbox"/> Fixed <input type="checkbox"/> ARM _____ %	\$ _____
<b>Loan Number</b>	<b>Impound Account</b>	<b>Loan Current</b>	<b>Loan Number</b>	<b>Impound Account</b>	<b>Loan Current</b>
_____	<input type="checkbox"/> Taxes <input type="checkbox"/> Ins. <input type="checkbox"/> Both \$ _____ \$ _____ \$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input type="checkbox"/> Taxes <input type="checkbox"/> Ins. <input type="checkbox"/> Both \$ _____ \$ _____ \$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>COMPLETE IF LOAN IS DELINQUENT</b>			<b>COMPLETE IF LOAN IS TO BE PAID OFF</b>		
<b>Est. Amount to bring Current</b>	<b>Reason of delinquency</b>		<b>Estimated Amount to Pay Off</b>		
\$ _____	_____		\$ _____		

<b>HOMEOWNER'S INSURANCE AND HOMEOWNERS ASSOCIATION INFORMATION</b>	
<b>INSURANCE COMPANY</b>	<b>HOMEOWNERS ASSOCIATION</b>
_____	_____
<b>COMPANY/AGENT</b>	<b>ASSOCIATION NAME</b>
Phone: (_____) _____	Phone: (_____) _____
Fax: (_____) _____	Fax: (_____) _____

<b>BANK ACCOUNT INFORMATION</b>	
Bank Name: _____	
Checking Account #: _____	Balance \$ _____
Savings Account #: _____	Balance \$ _____
Other Accounts: _____	Balance \$ _____
Bank Name: _____	
Checking Account #: _____	Balance \$ _____
Savings Account #: _____	Balance \$ _____
Other Accounts: _____	Balance \$ _____



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**MONTHLY EXPENSES/LIABILITIES**

LIABILITIES	UNPAID BALANCE	MONTHLY PAYMENT
Name and Address of the Company _____ _____		
Account No. _____ <input type="checkbox"/> To be paid through escrow <input type="checkbox"/> Credit Card <input type="checkbox"/> Mortgage Loan <input type="checkbox"/> Auto Loan		
LIABILITIES	UNPAID BALANCE	MONTHLY PAYMENT
Name and Address of the Company _____ _____		
Account No. _____ <input type="checkbox"/> To be paid through escrow <input type="checkbox"/> Credit Card <input type="checkbox"/> Mortgage Loan <input type="checkbox"/> Auto Loan		
LIABILITIES	UNPAID BALANCE	MONTHLY PAYMENT
Name and Address of the Company _____ _____		
Account No. _____ <input type="checkbox"/> To be paid through escrow <input type="checkbox"/> Credit Card <input type="checkbox"/> Mortgage Loan <input type="checkbox"/> Auto Loan		

**SCHEDULE OF REAL ESTATE OWNED**

Property Address	Type of Property	Present Market Value	Amount of Mortgage & Liens	Gross Rental Income	Mortgage Payments
1.					
2.					
3.					
<b>Totals</b>					

