



LENDER REQUEST FORM DATE _____

LENDER:

Company Name: _____ Officer: _____

Address: _____

Phone: _____ Fax: _____ Email: _____

SUBJECT PROPERTY:

Address/Description _____

City, State, ZIP: _____ County: _____

BORROWER/BUYER INFORMATION:

Buyer/Borrower #1: _____ SSN: _____ Marital Status: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Email: _____

Buyer/Borrower #2: _____ SSN: _____ Marital Status: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Email: _____

SERVICES REQUIRED:

Purchase _____ Refinance _____

Escrow Services _____ Title Only Services _____ Commitment _____ Survey _____

Termite Inspection _____ Deed Preparation _____ Type of Deed _____

Transaction Type: Conventional _____ FHA _____ VA _____ Non-Conforming _____

Loan Amount: _____ Estimated Closing Date: _____

Purchase Price: _____

NOTES: _____

FOR FASTER SERVICE, PLEASE INCLUDE SELLER AUTHORIZATION FORM