

PREQUALIFICATION FORM

Samir Patel – Licensed Mortgage Broker
Universal Trust Lenders, Inc.
3451 NE 1st Avenue, Suite M601 TEL: 1 (305) 213-0336
Miami, Florida 33137 FAX: 1 (866) 259-2927

www.BiscayneBlvdMortgage.com
www.BrickellMortgage.com

HOW DID YOU HEAR ABOUT US? _____

TODAY'S DATE: _____

REF. BY: _____

BORROWER: _____

BORROWER: _____

SS#: _____

SS#: _____

HOME PHONE #: _____

HOME PHONE #: _____

CELLULAR #: _____

CELLULAR #: _____

DATE OF BIRTH: _____

DATE OF BIRTH: _____

MARITAL STATUS: Married Single Divorced

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If married will spouse be on title? Yes / No If Yes, what is full name of spouse? _____

RESIDENCY STATUS:

RESIDENCY STATUS:

US CITIZEN RESIDENT OTHER

US CITIZEN RESIDENT OTHER

CURRENT RESIDENCE: _____

OWN RENT

of years: _____

EMPLOYMENT STATUS:

Self Employed Wage Earner

EMPLOYMENT STATUS:

Self Employed Wage Earner

PLACE OF EMPLOYMENT: _____

PLACE OF EMPLOYMENT: _____

ADDRESS: _____

ADDRESS: _____

POSITION: _____

POSITION: _____

TYPE OF BUSINESS: _____

TYPE OF BUSINESS: _____

YEARS ON THE JOB: _____

YEARS ON THE JOB: _____

GROSS MONTHLY INCOME: \$ _____

GROSS MONTHLY INCOME: \$ _____

PREVIOUS EMPLOYMENT: (IF PRESENT LESS THAN TWO YEARS) _____

Choose One: "PURCHASE" OR "REFINANCE"

PROPERTY WILL BE USED AS: Primary Residence Secondary Home Investment Property

PURCHASE PURCHASE PRICE: \$ _____ FIRST TIME HOMEBUYER? YES NO

DOWN PAYMENT: \$ _____ SOURCE OF DOWNPAYMENT: _____

TYPE OF PROPERTY: Single-Family Apartment Condo Townhouse Commercial

REFINANCE

Cash-Out No Cash-Out

Loan Amount: \$ _____ Estimated Home Value: \$ _____

Total Mortgage Debts: \$ _____ Current Mortgage Payments: _____

Is there a 1st Mortgage and a 2nd Mortgage? Yes No

Minimum months payments OF ALL REVOLVING AND INSTALLMENT DEBTS: \$ _____

(Don't include insurances, cell phones and/or rent – Only cars, credit cards and any loans)

DO YOU PREFER TO PAY TAXES AND INSURANCE:

MONTHLY (ESCROWED) YEARLY (NOT-ESCROWED)

MAX DESIRED MONTHLY PAYMENT? (TAXES / INSURANCE INCLUDED IN PAYMENT.) \$ _____

Bank Name: _____ **Balance:** \$ _____

Other Assets: \$ _____ **How many months has this Money been in your account?** _____

PROPERTIES OWNED:

<u>OO/2nd Home/Invest.</u>	<u>Mortgage</u>	<u>Payments</u>	<u>Rent</u>
_____	_____	_____	_____
_____	_____	_____	_____

BANKRUPTCY: YES NO If Yes, what CHAPTER? _____

Was it discharged or dismissed? please provide date: _____

FORECLOSURE: YES NO If Yes, discharged or dismissed? Please specify date: _____

CHILD SUPPORT: YES NO If Yes, what amount do you pay? _____

ALIMONY: YES NO If Yes, what amount do you pay? _____

I hereby authorize Universal Trust Lenders, Inc. to run my credit. The information obtained on this document is only to be used in the processing of my loan.

BORROWERS SIGNATURE

BORROWERS SIGNATURE

DATE

DATE