



COMMERCIAL SM

PRE-QUALIFICATION FORM

Buyer			
Name		Age	
Home Address	No. Years	<input type="checkbox"/> Own	<input type="checkbox"/> Rent
City State Zip		Birth Date	
Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Separated <input type="checkbox"/> Divorced		Dependents Other Than Listed By Co-Borrower No. Ages	
Name & Address of Employer		Yrs. in Line of Work or Profession? _____ Yrs. on Job Self Employed _____	
Position Title	Type of Business		
Social Security No.	Home Phone	Work Phone	

Co-Buyer			
Name		Age	
Home Address	No. Years	<input type="checkbox"/> Own	<input type="checkbox"/> Rent
City State Zip		Birth Date	
Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Separated <input type="checkbox"/> Divorced		Dependents Other Than Listed By Co-Borrower No. Ages	
Name & Address of Employer		Yrs. in Line of Work or Profession? _____ Yrs. on Job Self Employed _____	
Position Title	Type of Business		
Social Security No.	Home Phone	Work Phone	

GROSS MONTHLY INCOME	
Monthly Salary - Applicant	\$
Monthly Salary - Co-Applicant	\$
Other Monthly Income - Applicant	\$
Other Monthly Income - Co-Applicant	\$
	\$
	\$
	\$
	\$
	\$
Total Monthly Income	\$
<small>Income From Alimony, Child Support, or separate maintenance need not be declared if applicant does not desire such income considered in determining credit worthiness.</small>	

ASSETS	
Real Estate Owned	\$
Automobiles	\$
Cash On Hand	\$
Life Insurance (Cash Value)	\$
Personal Property Owned	\$
Stocks & Bonds	\$
Other Assets	\$
	\$
	\$
Total Assets	\$

CURRENT MONTHLY HOUSING EXPENSES	
Rent	\$
1st Trust Deed	\$
2nd Trust Deed	\$
Fire Insurance	\$
Real Estate Tax	\$
Homeowner Assn. Dues	\$
Other	\$
Total	\$

If a "yes" is given to a question in this column, explain on an attached sheet	Buyer Yes/No	Co-Buyer Yes/No
In the last 7 yrs., have you been declared bankrupt? If yes, discharged or dismissed?		
Have you had property foreclosed upon or have you given title by deed in lieu thereof?		
Are you a co-maker or endorser on a note?		
Are you a party to a law suit?		
Are you obligated to pay alimony, child support or separate maintenance?		

MONTHLY OBLIGATIONS

	Balance Owed	Monthly payment
Spousal/Child Support	\$	\$
Charge Account Payments	\$	\$
Credit Account Payments	\$	\$
Automobile Loans	\$	\$
Life Insurance	\$	\$
Loans on Other Real Estate	\$	\$
Other	\$	\$
Other	\$	\$
Other	\$	\$
(use additional page if necessary) Totals	\$	\$

SUBJECT TRANSACTION

Address or Legal of Property Being Purchased:					
Source of Proposed Down Payment:					
Rent From New Property	\$	-Op. Exp	\$	=	Net Income \$
Total Mortgage Payments:		+Tax and Ins.	\$	=	Total New Payment -
NEW R. E. COST					\$

SUMMARY OF INFORMATION

NET WORTH CALCULATION		CASH FLOW CALCULATIONS	
Total Assets (from Page 1)	\$	Total Monthly Income (From Page 1)	\$
Less: Total Obligations (from above)	-	Less: Monthly Payments (from above)	
NET WORTH	\$	Less: New R. E. Cost (from above)	
CASH AVAILABLE FOR LIVING EXPENSES			\$

AGREEMENT AND ACKNOWLEDGMENT

The undersigned applies for Seller Financing to be secured by a Deed of Trust on the property being purchased and represents that the property will not be used for any illegal or restricted purpose, and that all statements made in this application are true and are made for the purpose of obtaining the financing. Verification may be obtained from any source named in the application. The original or copy of this application will be retained by the seller even if the financing is not granted. The undersigned intends () does not intend () to occupy the property as their primary residence. I/We fully understand that failure to list all obligations owed or to accurately answer all questions is a fraudulent act subject to penalties of law.

BUYER'S SIGNATURE

DATE

CO-BUYER'S SIGNATURE

DATE

CREDIT REPORT AUTHORIZATION

In connection with the seller financing of _____

I (we) hereby authorize _____
to obtain a credit report on me (us).

(1) _____
Signature

(2) _____
Signature

Date: _____

Date: _____

Name (1) _____

Name (2) _____

Mailing Address: _____

(if self employed
business address): _____

Residence Address: _____

Previous Address: _____

Soc. Sec. # (1) _____ Date of Birth (1) _____

Soc. Sec. # (2) _____ Date of Birth (2) _____

Employment (1) _____

Employer Address (1): _____

Employment (2) _____

Employer Address (2) _____