

PRE-APPLICATION WORKSHEET

Please complete all information and return by fax, mail, or email prior to our appointment. By being as complete as possible, the formal application process will be much more timely and accurate.

BORROWER

Name: _____

Social Security #: _____

Street: _____

City: _____ State: _____ Zip: _____

Own Rent \$ _____ /month

of Years: _____

PHONE:

• Home: _____

• Work: _____

• Mobile: _____

Email: _____

Date of Birth: _____

Years of School: _____

Married Unmarried Separated

of Dependents: _____ Ages: _____

CO-BORROWER

Name: _____

Social Security #: _____

Street: _____

City: _____ State: _____ Zip: _____

Own Rent \$ _____ /month

of Years: _____

PHONE:

• Home: _____

• Work: _____

• Mobile: _____

Email: _____

Date of Birth: _____

Years of School: _____

Married Unmarried Separated

of Dependents: _____ Ages: _____

FORMER ADDRESS

(If less than two years at present address.)

Street: _____

City: _____ State: _____ Zip: _____

Own Rent

of Years: _____

Street: _____

City: _____ State: _____ Zip: _____

Own Rent

of Years: _____

EMPLOYMENT HISTORY

Past two years required.

Employer: _____

Street: _____

City: _____ State: _____ Zip: _____

Position: _____

Gross Monthly Income: _____ Commission: Yes No

Dates (From: _____ to: _____)

Self-Employed: Yes No

Employer: _____

Street: _____

City: _____ State: _____ Zip: _____

Position: _____

Gross Monthly Income: _____ Commission: Yes No

Dates (From: _____ to: _____)

Self-Employed: Yes No

PREVIOUS EMPLOYER

If less than two years with current employer

Employer: _____	Employer: _____
Street: _____	Street: _____
City: _____ State: _____ Zip: _____	City: _____ State: _____ Zip: _____
Position: _____	Position: _____
Gross Monthly Income: _____ Commission: <input type="checkbox"/> Yes <input type="checkbox"/> No	Gross Monthly Income: _____ Commission: <input type="checkbox"/> Yes <input type="checkbox"/> No
Dates (From: _____ to: _____)	Dates (From: _____ to: _____)
Self-Employed: <input type="checkbox"/> Yes <input type="checkbox"/> No	Self-Employed: <input type="checkbox"/> Yes <input type="checkbox"/> No

OTHER SOURCES OF INCOME*

*Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repayment.

ASSET ACCOUNTS

Includes checking, savings, money markets, certificates, and cash accounts.

Name of Institution: _____	Account #: _____	/ Type: _____	Balance: _____
Name of Institution: _____	Account #: _____	/ Type: _____	Balance: _____
Name of Institution: _____	Account #: _____	/ Type: _____	Balance: _____

AUTOS

Year: _____	Make: _____	Model: _____	Value: \$ _____
Year: _____	Make: _____	Model: _____	Value: \$ _____

OTHER ASSETS

Value of Current Home: \$ _____ Vested 401K: \$ _____ IRAs: \$ _____

LANDLORD

(If applicable.)

Landlord: _____ Phone: _____ # of Years: _____

ADDITIONAL REAL ESTATE OWNED

Property Address: _____	City: _____	State: _____	ZIP: _____
Mortgage Holder: _____	Payment: _____	Balance: _____	Property Type: _____
Property Address: _____	City: _____	State: _____	ZIP: _____
Mortgage Holder: _____	Payment: _____	Balance: _____	Property Type: _____

AUTHORIZATION TO OBTAIN CREDIT

I hereby authorize Lake Area Mortgage, its agents, or assigns, to obtain my/our credit report.

_____ Signature	_____ Date	_____ Signature	_____ Date
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