

FINANCIAL STATEMENT

LOAN NUMBER _____

PART A - BORROWER INFORMATION

Borrower Name		Social Security No.		Co-Borrower Name		Social Security No.	
Borrower Phone No: Day () Evening () Cell () Best Time to Call				Co-Borrower Phone No: Day () Evening () Cell () Best Time to call			
Property Address: Street City, State, Zip Code				Mailing Address: (If Applicable) Street City, State, Zip Code			
Email Address				Email Address			
Employer (Current)		Position		Employer (Current)		Position	
Years on Job		Employer Phone		Years on Job		Employer Phone	
*If in current job for less than 5 years enter your previous employer information below.							
Employer (Previous)		Position		Employer (Previous)		Position	
Years on Job		Employer Phone		Years on Job		Employer Phone	
*Second job (If Applicable)							
Employer (Second)		Position		Employer (Second)		Position	
Years on Job		Employer Phone		Years on Job		Employer Phone	

PART B – PROPERTY INFORMATION

Property for SALE?		Property for RENT?	
List Date / Price	Monthly Rent	Month Last Paid	Date Lease Expires
Realtor Name			
Realtor Phone			

PART C - MONTHLY INCOME

DESCRIPTION (MONTHLY)	BORROWER	CO-BORROWER	TOTAL
1. Gross Salary/Wages	\$	\$	\$
2. Other Income	\$	\$	\$
3. Other Additional Income (SSI, Rental, Second Job, Child Support)	\$	\$	\$
4. Total Net Income	\$	\$	\$

PART D - ASSETS

DESCRIPTION (MONTHLY)	BORROWER	CO-BORROWER	TOTAL
1. Cash on Hand	\$	\$	\$
2. 401K	\$	\$	\$
3. Savings	\$	\$	\$
4. Checking	\$	\$	\$

PART E - MONTHLY EXPENSES

DESCRIPTION (MONTHLY)	MONTHLY PAYMENT	BALANCE DUE	# MONTHS DELINQUENT
1. Primary Home Mortgage	\$	\$	
2. Rent Payment (if owner not occupying subject property)	\$	\$	
3. Maintenance/Homeowners Association Fees	\$	\$	
4. Property Taxes	\$	\$	
5. Home Owners Insurance / Flood Insurance	\$	\$	
6. Other Mortgages	\$	\$	
7. Automobile Loans	\$	\$	
8. Other Loans	\$	\$	
9. Credit Cards (minimum payment)	\$	\$	
10. Alimony/Child Support	\$	\$	
11. Child/Dependent Care	\$	\$	
12. Utilities (water, electricity, gas, cable, etc.)	\$	\$	
13. Telephone (Land line and Cell phone)	\$	\$	
14. Insurance (automobile, health, life)	\$	\$	
15. Medical Expenses (uninsured)	\$	\$	
16. Car expenses (gas, maintenance, parking)	\$	\$	
17. Groceries and Toiletries	\$	\$	
18. Other Monthly Expenses (Explain)	\$	\$	
19. Other Monthly Expenses (Explain)	\$	\$	
20. Other Monthly Expenses (Explain)	\$	\$	
Total	\$	\$	

PART F – General Questions

Question:	YES	NO
1. Do you occupy this mortgaged property as a Primary Residence?		
* If you answered, "Yes" to question 1, how long at this residence?	Years:	Months:
2. How many people in the household?		
3. Any dependents under the age of 18? If "Yes", how many?		
4. Do you have any other debts or obligations secured by this property? (Example: Second Mortgage, Home Equity loan, Judgments, or Liens)		
* If you answered, "Yes" to question 2, please itemize.	Amount	
	\$	
	\$	
	Amount	
3. What is the amount of funds you immediately have available to apply towards your mortgage delinquency?		
4. In addition to the amount stated above, what amount will you have available in 30 days?		