

HCF

Home Capital Funding

Licensed Mortgage Banker

524 West Meeker Street, Ste 6
Kent, WA 98032

Please indicate the type of loan.

- PURCHASE
- REFINANCE
- SECOND / EQUITY / CREDIT

Property Address: _____
 City / State / Zip: _____
 Approximate Loan Amount Desired: _____
 I'm not sure. Tell me what I qualify for.
 Sales Price of home _____

Notes: USE THIS SPACE TO LIST

ADDITIONAL INFORMATION FOR ANY OF THE ITEMS BELOW. (If space is insufficient, please attach a list of remaining items.)

1. **APPLICANT:** Name: _____ Social Security #: _____ Age: _____
 Home Phone: _____ Work Phone: _____ #Children: _____ Ages: _____
MAILING ADDRESS Present: _____ City / State: _____ Zip: _____
ADDRESS: (Last 2 years) Present: _____ City / State: _____ Zip: _____
 Own: _____ Rent: _____ # of Years: _____ Monthly Payment: _____ Years In School: _____
 Previous: _____ City / State: _____ Zip: _____
 Own: _____ Rent: _____ # of Years: _____ Monthly Payment: _____
EMPLOYMENT: (Last 2 years) Present Company _____ Position: _____
 Address: _____ City / State: _____ Zip: _____
 # of Years: _____ Gross Monthly Income: _____
 Previous Company: _____ Position: _____
 Address: _____ City / State: _____ Zip: _____
 Start Date: _____ End Date: _____ Gross Monthly Income: _____

2. **CO-APPLICANT:** Name: _____ Social Security #: _____ Age: _____
 Home Phone: _____ Work Phone: _____ #Children: _____ Ages: _____
MAILING ADDRESS Present: _____ City / State: _____ Zip: _____
ADDRESS: (Last 2 years) Present: _____ City / State: _____ Zip: _____
 Own: _____ Rent: _____ # of Years: _____ Monthly Payment: _____ Years In School: _____
 Previous: _____ City / State: _____ Zip: _____
 Own: _____ Rent: _____ # of Years: _____ Monthly Payment: _____
EMPLOYMENT: (Last 2 years) Present Company _____ Position: _____
 Address: _____ City / State: _____ Zip: _____
 # of Years: _____ Gross Monthly Income: _____
 Previous Company: _____ Position: _____
 Address: _____ City / State: _____ Zip: _____
 Start Date: _____ End Date: _____ Gross Monthly Income: _____

3. **OTHER INCOME:** Source: _____ Monthly Amount: _____ Source: _____ Monthly Amount: _____

4. **SOURCE OF DOWN PAYMENT AND CLOSING COSTS:** _____

5. **BANK ACCOUNTS:** (Including S&Ls, Credit Unions, etc.)
 Bank Name: _____ Address: _____ City / State / Zip: _____
 Checking Account #: _____ Balance: _____ Savings Account #: _____ Balance: _____
 Bank Name: _____ Address: _____ City / State / Zip: _____
 Checking Account #: _____ Balance: _____ Savings Account #: _____ Balance: _____
 Bank Name: _____ Address: _____ City / State / Zip: _____
 Checking Account #: _____ Balance: _____ Savings Account #: _____ Balance: _____

6. **STOCKS, BONDS, OTHER SECURITIES:** Name of Stock / Bond / Security: _____ Value of Shares: _____
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 Name of Stock / Bond / Security: _____ Value of Shares: _____

7. **CREDIT:** How would YOU rate your credit? Excellent Fair Problem

8. **VEHICLES:** (Including cars, trucks, campers, boats, trailers, RVs, etc.) Year & Make: _____ Value: _____
 Year & Make: _____ Value: _____ Year & Make: _____ Value: _____

9. **FURNITURE AND PERSONAL PROPERTY:** (Including jewelry, tools, computers, etc.) Total Value _____

10. **LIABILITIES:** (Include all credit cards, personal lines of credit, department stores, credit union loans **AND ALIMONY / CHILD SUPPORT**, separate maintenance you must pay.)
 Firm Name: _____ Account #: _____ Pmt: _____ Bal: _____
 Firm Name: _____ Account #: _____ Pmt: _____ Bal: _____
 Firm Name: _____ Account #: _____ Pmt: _____ Bal: _____
 Firm Name: _____ Account #: _____ Pmt: _____ Bal: _____

11. **MORTGAGE INFORMATION:** (For Present Residence) Payment: _____ 2nd Mortgage (Y / N) _____
 Lender Name: _____ Loan #: _____ Balance: _____ Value: _____
 Lender Address: _____ City / State / Zip: _____
 Property Insurance Company: _____ Contact Name: _____ Phone: _____

12. **OTHER REAL ESTATE OWNED:** Please attach a listing showing property address, property type (i.e. a duplex), % of ownership, date of acquisition, original cost, current market value, lender name and address, loan #, outstanding balance, monthly payment, monthly rental income (if any), monthly taxes and insurance.

ASSOCIATE DISCLOSURE

You have received this application from **HCF** Associate _____, who will assist you in the process of obtaining a loan.

1. Associate has agreed to participate in our Associate Program and has completed our required training program.
2. Associate is compensated BY US with a fee for loan services rendered to you.
3. You have no obligation to obtain financing from us; in fact, we encourage you to compare rates, products and service.

Applicant Signature _____ Date _____ Co-Applicant Signature _____ Date _____

INFORMATION DISCLOSURE AUTHORIZATION

I / We, hereby authorize you to release to **HCF** for verification purposes, information concerning:

- Employment history, dates, titles, income
- Mortgage loan rating (open date, high credit, payment amount, loan balance and payment record)
- Banking and savings accounts of record
- Any information necessary in connection with a credit report and/ or mortgage loan application

This information is for confidential use in compiling a mortgage loan application for a Conventional, FHA, or VA home loan lender. A photographic facsimile or other copy of this authorization may be deemed to be the equivalent of the original, and may be used as a duplicate original.

Applicant Signature _____ SSN _____ Date _____

Applicant Signature _____ SSN _____ Date _____