

# 1003 Package



Borrower Phone # \_\_\_\_\_ Co-Borrower Phone # \_\_\_\_\_

Borrower Email: \_\_\_\_\_ Co-Borrower Email: \_\_\_\_\_

If there is a co-borrower, both borrower and co-borrower must provide a separate email address

Party 1	Party 2
First _____ Middle _____ Last _____ Former last name(s), if any: _____ Birth Place: _____ Birth Date: _____ I am <input type="checkbox"/> single <input type="checkbox"/> married <input type="checkbox"/> have a <u>registered</u> domestic partner <u>Current</u> Spouse or Registered Domestic Partner (Other than Party 2) Name: _____ <u>Former</u> Spouse / domestic partner (if none, check this box <input type="checkbox"/> ) Deceased _____ Date _____ Divorced / Dissolution _____ Date _____	First _____ Middle _____ Last _____ Former last name(s), if any: _____ Birth Place: _____ Birth Date: _____ I am <input type="checkbox"/> single <input type="checkbox"/> married <input type="checkbox"/> have a <u>registered</u> domestic partner <u>Current</u> Spouse or Registered Domestic Partner (Other than Party 1) Name: _____ <u>Former</u> Spouse / domestic partner (if none, check this box <input type="checkbox"/> ) Deceased _____ Date _____ Divorced / Dissolution _____ Date _____
<b>Marriage or Domestic Partnership between Parties 1 and 2</b> Are Parties 1 and 2: <input type="checkbox"/> Married? Date: _____ <input type="checkbox"/> Registered Domestic Partners? Date: _____	

## Employment Information

### CURRENT

Borrower	Co-Borrower
<input type="checkbox"/> Self Employed <input type="checkbox"/> Retired Start Date: _____ Employer Name: _____ Employer Address: _____ Years employed in this line of work: _____ Business Phone: _____ Position / Title / Type of Business: _____	<input type="checkbox"/> Self Employed <input type="checkbox"/> Retired Start Date: _____ Employer Name: _____ Employer Address: _____ Years employed in this line of work: _____ Business Phone: _____ Position / Title / Type of Business: _____

### PREVIOUS

Borrower	Co-Borrower
<input type="checkbox"/> Self Employed Start Date: _____ End Date: _____ Employer Name: _____ Employer Address: _____ Years employed in this line of work: _____ Business Phone: _____ Position / Title / Type of Business: _____	<input type="checkbox"/> Self Employed Start Date: _____ End Date: _____ Employer Name: _____ Employer Address: _____ Years employed in this line of work: _____ Business Phone: _____ Position / Title / Type of Business: _____

## Living History

Need 2 year history

Present Address: _____ <input type="checkbox"/> Rent <input type="checkbox"/> Own Number of Years Living there: _____
Former Address: _____ <input type="checkbox"/> Rent <input type="checkbox"/> Own Number of Years Living there: _____
Former Address: _____ <input type="checkbox"/> Rent <input type="checkbox"/> Own Number of Years Living there: _____

## Real Estate Owned

Please list full address of all properties you currently own

Type: _____
1. _____ Type: _____
2. _____ Type: _____
3. _____ Type: _____
4. _____ Type: _____
5. _____ Type: _____

**Additional Information / Notes** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## 1003 Questionnaire

- a. Is there any outstanding judgments against you?
- b. Have you been declared bankrupt within past 7 years?
- c. Have you had property foreclosed upon or given lieu thereof in the last 7 years?
- d. Are you a party to a lawsuit?
- e. Have you directly or indirectly been obligated on any loan which resulted in foreclosure, transfer of the title in lieu of foreclosure, or judgments?
- f. Are you presently delinquent or in default on any Federal debt or any other loan, mortgage, financial obligation, bond or loan guarantee?
- g. Are you obligated to pay alimony, child support, or separate maintenance?
- h. Is any part of the down payment borrowed?
- i. Are you a co-maker or endorser on a note?
- j. Are you a U.S. citizen?
- k. Are you a veteran?
- l. Are you a permanent resident alien?
- m. Do you intend to occupy the property as your permanent residence?
  1. What type of property do you own? Principal residence (PR), Second home(SH) or Investment property(IP)?
  2. How do you hold title to the home? Solely by yourself(S), Jointly with your spouse(SP), or Jointly with another person(O)?
- n. 1. What is your ethnicity?  
*For Government monitoring purpose*
2. What is your race?  
*For Government monitoring purpose*
- o. How many dependents are listed on your Tax Return and what are their ages?