

Independent Consultant Request Form

Mortgage Company: _____

Mortgage Specialist/Officer: _____ Office # _____

Mortgage Specialist Email _____ Cell Phone # _____

Borrower Name/s: _____

Borrower Email: _____

Home Address: _____ City/Zip: _____

Home Phone No: _____ Cell Phone: _____

Property Address: _____ City/Zip: _____

of Units: _____ Owner Occupied _____ Investor _____

203(k) Mortgage _____ / Conventional Renovation Mortgage _____

Estimated Loan/Purchase Amount: _____

Maximum Loan Amount: _____

Estimated Rehab Amount: _____

Date Plan Ordered: _____

Date Plan needed by: _____

Settlement Date: _____

Loan # _____