

Proposal Request

*No services can be ordered until the 7th day after counseling in CA & UT

*NBS in TX is not allowed



Send to reverse@westcapitalending.com

- Quote
- Counseling Package
- Application Package

Who is paying for appraisal:

- Borrower
- Loan Officer
- 50/50 Split
- 100% Financed (please complete AFP form to request for approval on appraisal finance)

Application Taken By	<input type="checkbox"/> Face to Face <input type="checkbox"/> Mail <input type="checkbox"/> Telephone
ITP Date	

Attach Tri-Merge Credit Report

*Highlighted fields are necessary

LOAN OFFICER NAME	
LOAN OFFICER NMLS ID	
LOAN OFFICER COMPANY	
LOAN OFFICER MOBILE:	

NOTES/SPECIAL INSTRUCTIONS:

BORROWER FULL NAME		<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
DATE OF BIRTH	SSN	<input type="checkbox"/> MARRIED <input type="checkbox"/> UNMARRIED
HOME PHONE	EMAIL ADDRESS	
IMMIGRATION:	RACE:	<input type="checkbox"/> AMERICAN INDIAN <input type="checkbox"/> PACIFIC ISLANDER <input type="checkbox"/> ASIAN <input type="checkbox"/> WHITE <input type="checkbox"/> BLACK OR AFRICAN AMERICAN <input type="checkbox"/> NOT DISCLOSED
ETHNICITY:	<input type="checkbox"/> US CITIZEN <input type="checkbox"/> LEGAL/PERM RESIDENT <input type="checkbox"/> OTHER <input type="checkbox"/> NOT HISPANIC OR LATINO <input type="checkbox"/> HISPANIC OR LATINO <input type="checkbox"/> NOT DISCLOSED	

IF THE BORROWER IS MARRIED WE MUST KNOW THE SPOUSE'S DOB EVEN IF THE SPOUSE DOES NOT RESIDE IN THE SUBJECT PROPERTY

CO-BORROWER FULL NAME		<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
DATE OF BIRTH	SSN	<input type="checkbox"/> MARRIED <input type="checkbox"/> UNMARRIED
HOME PHONE	EMAIL ADDRESS	
IMMIGRATION:	RACE:	<input type="checkbox"/> AMERICAN INDIAN <input type="checkbox"/> PACIFIC ISLANDER <input type="checkbox"/> ASIAN <input type="checkbox"/> WHITE <input type="checkbox"/> BLACK OR AFRICAN AMERICAN <input type="checkbox"/> NOT DISCLOSED
ETHNICITY:	<input type="checkbox"/> US CITIZEN <input type="checkbox"/> LEGAL/PERM RESIDENT <input type="checkbox"/> OTHER <input type="checkbox"/> NOT HISPANIC OR LATINO <input type="checkbox"/> HISPANIC OR LATINO <input type="checkbox"/> NOT DISCLOSED	

Alternative Contact: Name: Relationship: Address: Tel:

PROPERTY ADDRESS				ZIP CODE:	
MONTHLY INCOME	\$	EST. PROPERTY VALUE	\$	PRIMARY RESIDENCE	<input type="checkbox"/> Yes <input type="checkbox"/> No
MONTHLY MIN. PYMTS	\$	EXISTING MTG BALANCE	\$	OWNER OCCUPIED	<input type="checkbox"/> Yes <input type="checkbox"/> No
PROPERTY TAX AMT	\$	ADD'L LIENS TO PAYOFF	\$	EXISTING FHA LOAN	<input type="checkbox"/> Yes <input type="checkbox"/> No
HAZARD INSURANCE AMT	\$	OUTSTANDING JUDGMENTS	<input type="checkbox"/> Yes <input type="checkbox"/> No	PROPERTY IN BANKRUPTCY	<input type="checkbox"/> Yes <input type="checkbox"/> No
SQUARE FT OF HOME		DEFAULT ON FEDERAL DEBT	<input type="checkbox"/> Yes <input type="checkbox"/> No	PROPERTY IN FORECLOSURE	<input type="checkbox"/> Yes <input type="checkbox"/> No
NO. OF ADULTS IN HOME		POWER OF ATTORNEY	<input type="checkbox"/> Yes <input type="checkbox"/> No	PROPERTY HELD IN TRUST	<input type="checkbox"/> Yes <input type="checkbox"/> No
YEAR BUILT		BWR INCOMPETENT (MENTAL CONDITION)	<input type="checkbox"/> Yes <input type="checkbox"/> No	BWR INCAPACITATED (PHYSICAL CONDITION)	<input type="checkbox"/> Yes <input type="checkbox"/> No
PROPERTY TYPE	<input type="checkbox"/> SFR <input type="checkbox"/> MULTI UNIT <input type="checkbox"/> CONDO (FHA APPROVED) <input type="checkbox"/> MANUFACTURED HOME <input type="checkbox"/> MODULAR HOME		ESTATE	<input type="checkbox"/> FEE SIMPLE <input type="checkbox"/> LIFE ESTATE <input type="checkbox"/> LEASEHOLD	
PURPOSE OF LOAN	<input type="checkbox"/> ADD'L INCOME <input type="checkbox"/> HOME IMPROV. <input type="checkbox"/> ELIMINATE MORTGAGE <input type="checkbox"/> LEISURE <input type="checkbox"/> MEDICAL <input type="checkbox"/> PAY TAXES/INSURANCE <input type="checkbox"/> OTHER _____				
YEARS AT CURRENT ADDRESS					

- 1 COUNSELING
- 2 APPLICATION
- 3 FHA CASE NUMBER REQUEST
- 4 ORDER SERVICES (APPRAISAL/TITLE)
- 5 SUBMIT TO UW

Minimum Requirements for Loan Submission

The following items are required when requesting for application package from the Processing Department.

All New Submissions

Item	Requirement
Submission Checklist	Must be completed in its entirety.
Counseling Certificate	Must be signed by the counselor (if not signed by borrower(s) we can get that signed with application package) .
Date of Birth Exhibit	Provide a valid photo ID or passport. If using a birth certificate, it must list the borrower's current name or include documentation (e.g., marriage license) to establish a name change.
Social Security Number Exhibit	If using SSA-89, provide a Letter of Explanation (LOE) along with one of the following to validate the SSN: W-2, tax return, 1099, or pay stub.
Income Documentation	Must have minimum documentation to source income .
Home Insurance Dec Page	Include the declarations page, or at minimum the insurance agency's contact information so the processor can obtain it.
Mortgage Statement, if applicable	Required if mortgage not showing on credit report.
Supporting Documentation for Power of Attorney, if applicable	Provide an LOE to confirm why the POA is being used and, if necessary, a doctor's letter certifying the borrower was competent when the POA was executed.
Trust Agreement, if applicable	Required upfront for title attorney review/approval (lender submission cannot proceed without this).
Real Estate Owned (REO), if applicable	If the borrower owns additional properties, provide all supporting property charge documents to confirm on-time payments.

Home Condition Self-Check (FHA Reverse Mortgage) for AFP approval (appraisal to be financed)

■ ■ Note: Appraisals for condominiums, manufactured or mobile homes, multi-family properties, or properties located in flood zones are not eligible for financing. In addition, loans requiring a Life Expectancy Set-Aside (LESA) are not approved for financing. ■ ■

Borrower Name: _____

Property Address: _____

Date: _____

General Condition

1. Is your roof free from leaks and major damage? n Yes n No
2. Are exterior walls and paint in good condition (no major peeling or exposed wood)? n Yes n No
3. Are gutters and downspouts attached and working? n Yes n No

Safety & Security

1. Do all doors and windows open, close, and lock properly? n Yes n No
2. Are there handrails on any stairs or decks? n Yes n No
3. Do you have smoke detectors on every level of the home? n Yes n No
4. Do you have a carbon monoxide detector (if required in your area)? n Yes n No

Utilities & Systems

1. Are your water, electricity, and heating systems all working? n Yes n No
2. Do you have hot and cold running water in the kitchen and bathrooms? n Yes n No
3. Is your water heater working properly? n Yes n No

Interior

1. Are walls, ceilings, and floors free of large holes or major damage? n Yes n No
2. Do bathrooms have a working toilet, sink, and tub/shower? n Yes n No
3. Is your kitchen complete with a sink and cooking area? n Yes n No

Health & Safety

1. Is the home free of mold, mildew, or major water damage? n Yes n No
2. Is the home free of pests, rodents, or infestations? n Yes n No
3. If the home was built before 1978, is it free of peeling paint? ■ Yes ■ No

Yard / Outside

1. Is your yard free of hazards (open wells, large holes, unsafe sheds)? Yes No
2. If you have a pool, is it covered or secured? Yes No

Additional Notes:

Property Eligibility

1. What type of property is this?
- Single-Family Home
 - Condominium (Not Eligible)
 - Manufactured/ Mobile Home (Not Eligible)
 - Multi-Family Home (Not Eligible)
2. Is the property located in a FEMA-designated flood zone?
- Yes (Not Eligible)
 - No
3. Does the loan require LESA?
- Yes (Not Eligible)
 - No

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The Loan Officer agrees that if this transaction fails to close, the Loan Officer will be solely responsible for payment of the appraisal invoice.

Loan Officer Signature: _____ Date: _____