

# Mortgage Information Questionnaire



Please tell us about your client (All information provided herein may be used to verify identity): Under the rules and regulations set forth by industry regulators and the U.S. Patriot Act, we are required to obtain the information requested below. All information must be fully completed for an accurate evaluation and rate quote. Feel free to contact us if you have any questions or concerns.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Your Date of Birth: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ Credit Score: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Employer's Address: \_\_\_\_\_ Employed Since: \_\_\_\_\_

Annual Salary: \$ \_\_\_\_\_ Household Income: \_\_\_\_\_ Net Worth: \_\_\_\_\_

Property Address: \_\_\_\_\_

Length of time at this address: \_\_\_\_\_ Current Lender: \_\_\_\_\_

Current Loan Amount: \_\_\_\_\_ Current Rate and Program: \_\_\_\_\_

Approximate Home Value: \_\_\_\_\_ Do you want Cash Out: YES NO

Home equity Loan: YES NO Home equity Loan Amount outstanding: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_

Spouse's Social Security #: \_\_\_\_\_ Spouse's Date of Birth: \_\_\_\_\_

Spouse's Driver's License #: \_\_\_\_\_ Credit Score: \_\_\_\_\_

Spouse's Employer: \_\_\_\_\_ Spouse's Occupation: \_\_\_\_\_

Employer's Address: \_\_\_\_\_ Employed Since: \_\_\_\_\_

Spouse's Annual Salary: \$ \_\_\_\_\_ Number of Dependent Children: \_\_\_\_\_

Child One: Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ SSN: \_\_\_\_\_

Child Two: Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ SSN: \_\_\_\_\_

Referred by: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Please email completed questionnaire to [Peter@KarpCapital.com](mailto:Peter@KarpCapital.com) and fax to 415-869-2832.

If you have any questions call Peter Karp at 415-345-8185