Loan Application

Lincoln Mutual HOME MORTGAGE

Jose Valdovinos Team (562) 322-4990

Please Fax Form to: (888) 667-5848

Realtor's Name:	Realtor's Phone Number:
Subject Property Address:	
Subject City: Sul	bject Zip Code: State:
Approx. Purchase Price:Occupa	ncy: □Owner Occupied □Investment □2nd Home
Property Type: ☐ SFR ☐ Condo ☐ Duplex ☐ 3 Units ☐ 4 Units+	
Type of Loan: □Conventional □FHA □VA □REFI Down Payment Amount or %:	
Down-Payment is coming from: □Checking □Savings □Retirement □Gift	
Borrower's Info	Co-Borrower's Info
Borrower's Email:	Borrower's Email:
Borrower's Name:	Borrower's Name:
Address:	Address:
City: Zip:	City: Zip:
Rent Own How Long:yearsMonths	☐ Rent ☐ Own How Long:yearsMonths
Telephone:	Telephone:
DOB: / / Social Security:	DOB: / / Social Security:
Borrower's Employment & Income	Co-Borrower's Employment & Income
Employer's Name:	Employer's Name:
Employer's Address:	Employer's Address:
City: Zip:	City: Zip:
Employer's Telephone Direct Main:	Employer's Telephone Direct Main:
Position: Yrs. on Job:	
Self Employed: ☐Yes ☐No FICO Score:	Self Employed: Yes No FICO Score:
Monthly Gross Income:	Monthly Gross Income:
Total Liquid Assets Available: (Checking, Savings, 401K, Stocks & Bonds, CD, Retirement, Etc.)	Total Liquid Assets Available:(Checking, Savings, 401K, Stocks & Bonds, CD, Retirement, Etc.)
Client Checklist 2 Months Bank Statements 2 Years Tax Return, 2 years W-2 1 Month Paycheck Stub Copy of Drivers License and Social Security Card	 □ Copy of Credit Report (If Available) □ If Self-Employed, 2 Years Tax Returns □ Does buyer Own Any Other Property? Yes □ No □ (If yes, Provide Current Bill Mortgage Statement, Property Tax, Property Insurance)