## Second Mortgage or Home Improvement Loan Application

Title in name of:    Address of title halder   More part   More present and emotivage is accomplished emotivage in countries	TYPE LOAN APPLIED Secured Unsecured \$ Interest rate Simple Int. Add-on %			Monthly payment Principal & Interes	t Single Fa	Property type Single Family Dwelling 2-4 Family Dwelling Dubling Other		
Address of tills habor   Managed and Park Configure to a Configure and Configure to	Address of property to be improved				11/11/20/11/11/20/20/20/20/20/20/20/20/20/20/20/20/20/		of home	
If the & a new residential dirution to the completed and compared the Set of Section 2 of the Section 3 of the Section 2 of t	Title in name of:  Address of title holde	er			Mortgage Type: Is y graduated payment	mortgage or	irst mortgage a con an FHA 245 mortga	age loan?
Property Improvement			Gross		(Specify typ		a management	No
Properly Improvement								
Secret   S	The Co-Borrower Section and all other Co-Borrower questions must be completed and the appropriate completed and the spropriate completed completed and the spropriate completed and the spropr	opriate box(es)	) checked if	another person w	If be jointly obligated w	Propert Rehabi Additio Energy Solar I	ty Improvement ilitation/Moderniza ns r Conservation nstallation on the loan,or  the	tion Bor-
Name   Age   Name   Age   Name   Age   Name   Age   Name   Age   Present Address (if different from above) No. Years   Own   Rent   Street   CityState/Zip	the property is located, in a community property state.	e or assets of	f another pe	rson as a basis for rep			er is married and reside	s, or
Street City/State/Zip Former address if less than 2 years at present address Street City/State/Zip Former address if less than 2 years at present address Street City/State/Zip Former address if less than 2 years at present address Street City/State/Zip Former address if less than 2 years at present address Street City/State/Zip Former address if less than 2 years at present address Street City/State/Zip Former address if less than 2 years at present address Street City/State/Zip Former address if less than 2 years at present address Street City/State/Zip Former address if less than 2 years at present address Street City/State/Zip Former address if less than 2 years at present address Street City/State/Zip Former address if less than 2 years at present address Street City/State/Zip Former address if less than 2 years at present address Street City/State/Zip Former address if less than 2 years at present address Street City/State/Zip Former address if less than 2 years at present address Street City/State/Zip Former address if less than 2 years at present address Street City/State/Zip Former address if less than 2 years at present address Street City/State/Zip Former address if less than 2 years at present address Street City/State/Zip Former address if less than 2 years at present address Street City/State/Zip Former address if less than 2 years at present address Street City/State/Zip Former address if less than 2 years at present address Street City/State/Zip Former address if less than 2 years at present address Street City/State/Zip Former address if less than 2 years at present address Street City/State/Zip Former address if less than 2 years at present address Street City/State/Zip Former address if less than 2 years at present address Street City/State/Zip Former address if less than 2 years at present address Street City/State/Zip Former address if less than 2 years at present address of less former In leas former address if less than 2 years at present address of leases at present address of leases at p	- D=000mm5x4000mm	Age	Name		00 20110110			Age
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Ecomer address if less than 2 years at present address				e/7in				
Chy/State/Z/p Years at former address  Own  Rent Complete for secured loans only	Former address if less than 2 years at present address		Former	TOTAL STATE OF THE	nan 2 years at pr	resent addre	ess	
Complete for secured loans only   Dependents other than listed by Co-Berrower   Mon.   Ages   Married   Geparated   Geparate				e/Zip				
Married   Geparated   Married   Geparated   Married   Geparated		rrower		A R Made and I have a reason of the transfer formation	eritar constituir			orrower
Name and Address of Employer  Years employed in this line of work or profession? Years rears on this job. Self Employed*  Position/Title  Type of Business  Phone  Business Phone  Business Phone  Name & Address of nearest relative not living with you  Relationship  Home phone  Bank  Account No. Name & Address of Depository  Relationship  Home phone  Type of Business  Phone  Business Phone  Bank  Account No. Name & Address of Depository  Relationship  Home phone  Bank  Account No. Name & Address of Depository  Relationship  Home phone  Bank  Account No. Name & Address of Depository  Relationship  Home phone  Position/Title  Type of Business  Position/Title  Type of Business  Phone  Bank  Account No. Name & Address of Depository  Relationship  Home phone  Bank  Account No. Name & Address of Depository  Relationship  Relat	☐ Married ☐ Separated No. Ages	nower	□ M	arried	Separated	200 (200 (100 (100 (100 (100 (100 (100 (	Saltinio wasty walde DefAle	OTOWE
of work or profession? Years Years on this job. Self Employed*  Position/Title Type of Business  Social Security Number*** Home Phone Business Phone Social Security Number*** Home Phone Name & Address of nearest relative not living with you Relationship Home phone Name & Address of nearest relative not living with you Relationship Home phone Name & Address of nearest relative not living with you Relationship Home phone  Total  Those Total  Describe Other Income Savings Resorder Co-Borrower Total  The Employed in Current Position For Less Than Two Years, Complete the Following BC Previous Employer/School City/State Type of Business  Position/Title Type of Business Phone Business Phone Name & Address of nearest relative not living with you Relationship Home phone Name & Address of nearest relative not living with you Relationship Home phone Name & Address of nearest relative not living with you Relationship Home phone Name & Address of nearest relative not living with you Relationship Home phone Name & Address of nearest relative not living with you Relationship Home phone Name & Address of nearest relative not living with you Relationship Home phone Name & Address of nearest relative not living with you Relationship Home phone Name & Address of nearest relative not living with you Relationship Home phone Name & Address of nearest relative not living with you Relationship Home phone Name & Address of nearest relative not living with you Relationship Home phone Name & Address of nearest relative not living with you Relationship Home phone Name & Address of nearest relative not living with you Relationship Home phone Name & Address of nearest relative not living with you Relationship Home phone Name & Address of nearest relative not living with you Relationship Home phone Name & Address of nearest relative not living with you Relationship Home phone Name & Address of nearest relative not living with you Relationship Home phone Name & Address of	widowed)			wi	dowed)			AL 1 - 11 -
Position/Title  Type of Business  Phone  Business Phone  Social Security Number*** Home Phone  Business Phone  Monthly Income  These Questions Apply To Both Borrower and Co-Borrower  Wes or No  Are you a co-maker or endorser on a note?  Are you a co-maker or endorser on a note?  Do you have any past due obliga-	of work or profession'Years	1?	Name a	nd Address of E	mployer	of	work or professi	on?
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Name & Address of nearest relative not living with you  Relationship Home phone    Name & Address of nearest relative not living with you   Relationship Home phone   Name & Address of nearest relative not living with you   Relationship Home phone   Name & Address of Depository	Position/Title Type of Business		r OsitiOTI/	ritie		type of Busi	11633	
Gross Monthly Income    Item	Social Security Number*** Home Phone Business Phone		Social S	ecurity Number*	Home Pho	ne	Business Phone	
Item   Borrower   Co-Borrower   Total   Checking	Name & Address of nearest relative not living with you Relationship Home	e phone	Name & A	ddress of nearest	relative not living wi	ith you	Relationship Ho	me phone
Savings   Savi				Account No.	Nan	ne & Addres	ss of Depository	
Other † (Before completing, see notice under Describe Other Income Below.) Total  Describe Other Income Below.) Total  Describe Other Income Below.) Total  Describe Other Income  NOTICE: † Alimony, child support, or separate maintenance income need not be revealed if the Borrower Monthly Amount  These Questions For Less Than Two Years, Complete the Following  BC Previous Employer/School City/State Type of Business Position/Title Dates From/To Monthly Income  These Questions Apply To Both Borrower and Co-Borrower  If a "'yes" answer is given to a question in this column, please explain on an attached sheet.  Are there any outstanding judgments against you?  Have you been declared bankrupt within the past 7 years?  Do you have any past due obliga-		Checking						
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Describe Other Income  NOTICE: † Alimony, child support, or separate maintenance income need not be revealed if the Borrower or Co-Borrower does not choose to have it considered as a basis for repaying this loan.  If Employed In Current Position For Less Than Two Years, Complete the Following  B/C Previous Employer/School City/State Type of Business Position/Title Dates From/To Monthly Income  These Questions Apply To Both Borrower and Co-Borrower  If a "yes" answer is given to a question in this column, please explain on an attached sheet.  Are there any outstanding judgments against you?  Have you been declared bankrupt within the past 7 years?  Do you have any past due obliga-	Other + (Before	Yes 🗆 N	lo					
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II DESCRIPTION OF THE PROPERTY	Other † (Before completing, see notice under Describe Other Income Below.) Total    S	Savings  Yes No be Othe t, or separa choose to h  Less Th ype of Busi	er Inco	vo Years, Co	omplete the little Di	Following ates From/To	Month  Wer Co-Borror	ount
Have you had property foreclosed upon or given agency of the federal government?**  title or deed in lieu thereof in the last 7 years?	Other † (Before completing, see notice under Describe Other Income Below.) Total    S	Savings  Yes No be Othe t, or separa choose to h  Less Th ype of Busi	han Tviness	vo Years, Co Position/T  wower and Co you a co-maker ote?  you have any p	omplete the little Discover or endorser on last due obliga-	Following ates From/To	Month  Wer Co-Borror	ount
Are you a party to a law suit?	Other † (Before completing, see notice under Describe Other Income Below.) Total    S	Savings  Yes No be Othe t, or separa choose to h  Less Th ype of Busi	han Tviness  Area a n  Do tior age	vo Years, Co Position/T  ower and Co  you a co-maker ote?  you have any position of the feder	pmplete the litle Discover or endorser on last due obligatured by any all government?"	Following ates From/To	Month  Wer Co-Borror	ount
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Are you obligated to pay alimony, child support, or	Other † (Before completing, see notice under Describe Other Income Below.) Total  B-Borrower C-Co-Borrower  If Employed In Current Position For L  B/C Previous Employer/School City/State Ty  These Questions Apply T  If a "yes" answer is given to a question in this column, please explain on an attached sheet.  Are there any outstanding judgments against you?  Have you been declared bankrupt within the past 7 years?  Have you had property foreclosed upon or given title or deed in lieu thereof in the last 7 years?  Are you a party to a law suit?	Savings  Yes No be Othe t, or separa choose to h  Less Th ype of Busi	han Tviness  Area n  Do tior age	vo Years, Considered as a basis  vo Years, Constitution/I	pmplete the little D.	Following ates From/To	Month  Wer Co-Borror	ount

<sup>\*</sup> FHLMC/FNMA require business credit report, signed Federal Income Tax returns for last two years; and, if available, audited Profit and Loss Statement plus balance sheet for same period.

\*\*\* Required only if FHA or VA home improvement loan.

\*\*\* Polylonal for FHLMC
FHLMC 703 Rev. 10/86

\*\*Bankers Group Purchasing, Waltham, MA 02154 Form

DE		obligations and installment according debt, list three previous		led list on attached shee	ts.)*				
Q	B-Borrower C-Co-Borrower	100 800 0 700	ne and Address	Account No.	Date Incurred	Original Amount	Present Balance	Monthly Payment	Amount Past Due
						\$	\$	\$	\$
Н									
H						1)			
Н									
		65							
П									
Н	Lien Holder		Year and Make:						
Ц	Lien Holder		Total and Make.						
	Elien Holder		Year and Make:						
П	Name & Ad	dress of First Lien Holder of	of Security Property		ii.				
Н	Name & Ad	dress of Subordinate Lien F	Holder(s) of Security	-					
Ц	Name & Ad	droop of odportunate close i	lolder(s) or occurry						
	List Debts C								
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Н									
Ц	1.00								
	list any additiona been received:	al names under which credi	t had previously	If not included in n following: Monthly					
				Monthly payment for	or Home Own	er Association	n dues >		
				monthly paymont is	photodelegist legist, (1)	UNITED OF A PRODU			
					Total N	Monthly Obliga	ations		
			IMPORTANT - APP	LICANT READ BE	FORE SIGN	ING			
ı	We apply for the	loan indicated in this appli	cation which may be secu	red by a mortgage or	deed of trust	on the prope	rty described h	erein and rep	resent that
(	btaining the loai	not be used for any illegal on. Verification may be obtain	ned from any source nam	ed in this application	. The original	or a copy of	this application	n will be retai	ned by the
t	ender, even if the enter the impr	e loan is not granted. I/We oved property for the sole p	nereby consent to and au ourpose of determining that	at the improvements	UD-FHA, FNN specified in th	is application	have been co	ng of reasona mpleted.	able notice,
		RSTAND THAT THE SELEC							
		SPONSIBILITY, NEITHER			C GUARANTE	ES THE MAT	TERIAL OR W	ORKMANSHI	Ρ.
	I/We □ do d	or $\square$ do not intend to occup	by the property as my/our	primary residence.					
		that it may be a federal cri- oplicable under the provisio			n, to knowingl	y make any f	alse statement	s concerning	any of the
		Borrower's Signature	Date		Co-Borrowe	r's Signature		Date	
	40.00	The state of the state of	Information For G	overnment Mon	itoring Pu	rposes	West H	CALL S	Marie Land
7	he following info	rmation is requested by the	Federal Government for	certain types of loans	related to a c	dwelling, in or	der to monitor	the lender's	compliance
T	nay neither discri	opportunity and fair housing minate on the basis of this is	nformation, nor on whethe	r you choose to furnis	h it. However,	if you choose	not to furnish	it, under Fed	eral regula-
C	heck the box be	s required to note race and elow. (Lender must review to	he above material to ass	al observation or surr ure that the disclosur	name. If you o res satisfy all	to not wish to requirements	furnish the all to which the	oove informat Lender is sub	ion, please oject under
		aw for the particular type of	1 SACED COMMUNICATION ( SOCIETY)		8				
	Race/National O			Race/Nationa	al Origin:		h this informat		
	☐ Black [	an Indian, Alaskan Native □ □ Hispanic □ White	Asian, Pacific Islander	☐ Bla	ck 🗆 Hispani		ive  Asian, F	Pacific Islande	er
5	Other (sex: Female				er (specify): male	9			
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