



FUNDING CORP.

33 Wood Ave S, 5th Floor
Iselin, New Jersey 08830
732-494-4999 x161
732-494-4888 Fax

Quick & EZ LOAN APPLICATION

Borrowers name: _____ Social: _____ DOB: ___/___/___

Co-Borrowers name: _____ Social: _____ DOB: ___/___/___

Property address: _____

City: _____ State: _____ Zip Code: _____

Loan purpose: Refinance _____ Purchase _____

Property type: 1-4 family (# units _____) CO-OP _____

Condo/Town house _____ Investment Property _____

Refinance: Value of home \$ _____ Loan amount \$ _____

Purchase: Purchase price \$ _____ Loan amount \$ _____

Estimated annual real estate taxes: \$ _____

Total monthly income all borrowers (salary; pension; social security; disability ins): \$ _____

Total liquid assets (savings; checking; 401k; stocks; bonds; CD's; IRAs and annuities): \$ _____

If refinance current mortgage balance: 1st mtg. \$ _____ Rate: _____%

2nd mtg. \$ _____ Rate: _____%

Home #(_____) _____ Work#(_____) _____ Cel# _____

Email address _____