



PRE-QUALIFICATION FORM

Office 260-470-9999 / Fax 260-471-0777
3705 Rupp Drive Suite 100, Ft. Wayne, IN 46815

Date: _____ / _____ , 20__

BORROWER

Name (First, MI, Last)
SS#: _____
Hm Ph / Cell: (_____) _____
DOB: _____ / _____ / _____
Yrs of School: _____
of Children: _____
Ages of Children: _____
Marital Status: _____

ADDRESS (2 Year History)

Current: _____

of Years: _____
Rent or Own
Landlord: _____

EMPLOYMENT (2 Year History)

Company: _____
Phone: (_____) _____
Address: _____

Position: _____
Dates: ____/____/____ - ____/____/____
Rate/Income: _____ Hourly / Salary
Ave Hrs: _____
Prior Employer: _____

Money Saved for Down Payment: _____
Source: _____

Term: 10 15 20 25 30

CO-BORROWER

Name (First, MI, Last)
SS#: _____
Home Ph / Cell: (_____) _____
DOB: _____ / _____ / _____
Yrs of School: _____
of Children: _____
Ages of Children: _____
Marital Status: _____

ADDRESS (2 Year History)

Current: _____

of Years: _____
Rent or Own
Landlord: _____

EMPLOYMENT (2 Year History)

Company: _____
Phone: (_____) _____
Address: _____

Position: _____
Dates: ____/____/____ - ____/____/____
Rate/Income: _____ Hourly / Salary
Ave Hrs: _____
Prior Employer: _____

Bankruptcy: Yes No
When was it released? ____/____/____

Child Support: Receive Pay

What amount? _____