2010 Crow Canyon Place Suite 410 San Ramon, CA 94583 PHONE: 925 513 3942 Ext. 240 cgoulart@aboutcaliforniahomeloans.com

FAX TO: Chris Goulart FAX: 925 226 4739

Loan Submission Form

Loan Officer: _____ Email: _____ Phone: _____Fax:____ Borrower Name _____ Spouse's Name _____ Property Address _____ Type of Property: City ______ State _____ Zip _____ County: _____ Home #______Work # _____ Email _____ Income Verification: • FULL • STATED • LITE DOC Estimated Value \$ _____ Requested Loan Amount: \$ _____ CLTV: _____ % Appraisal • Yes • No Any additional cash out requested after paying off any liens and/or debt: \$_____ 1st Mortgage Co. ______ Balance _____ Impounds Y/N 2nd Mortgage Co.______ Balance _____ Additional Mortgages/Liens: ______ Please briefly summarize the loan: Documents you are including: □ 1003 point file .pcf or .brw ☐ Insurance Dec. Page ☐ Last 2 Years P&L's □ 1008 □ Credit Report ☐ Year to Date P&L's Bank Statements ☐ Tax Peturns if □ Borrower's Authorization □ Rent Roll

☐ Tax Returns if available ☐ Appraisal or Pictures

☐ Mortgage Statement(s)