



Mortgage Planning Worksheet

Acquiring and financing real estate should be considered an integral part of your overall financial plan. The correct mortgage can have a significant impact on your financial future. **No single mortgage program is appropriate for every situation and choosing the wrong program could cost you thousands of dollars unnecessarily as well as delay other financial goals.** I will always follow your instructions regarding your mortgage choice but want to make sure you are aware of all the appropriate options within the context of your own financial future.

Wendy Cutrufelli ♦ Certified Mortgage Planner ♦ Direct: 877-27Wendy

I/We understand that the information provided in this worksheet will be used to complete our Uniform Residential Loan Application which will be sent for my / our review and signature. I/We certify that the information provided is true and accurate as of the date set forth on this worksheet without any intentional or negligent misrepresentation.

Borrower		CoBorrower	
Name:	Date of birth:	Name:	Date of birth:
Social Security:		Social Security:	
If returning this form via e-mail, please telephone to provide SS# and DOB		If returning this form via e-mail, please telephone to provide SS# and DOB	
Number of dependents: <input type="checkbox"/>	Their ages? _____	Number of dependents? <input type="checkbox"/>	Their ages? _____
Marital Status: Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried <input type="checkbox"/>		Marital Status: Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried <input type="checkbox"/>	
Current Address:		Current Address:	
City, State, Zip:		City, State, Zip:	
Current Rent: \$ _____ (if applicable)		Current Rent: \$ _____ (if applicable)	
How long? Years <input type="checkbox"/> Months <input type="checkbox"/>		How long? Years <input type="checkbox"/> Months <input type="checkbox"/>	
If less than 2 years at current address, please provide previous:		If less than 2 years at current address, please provide previous:	
Current Address:		Current Address:	
City, State, Zip:		City, State, Zip:	
How long? Years <input type="checkbox"/> Months <input type="checkbox"/>		How long? Years <input type="checkbox"/> Months <input type="checkbox"/>	
Borrower Employment		CoBorrower Employment	
Employer name		Employer name	
Street Address		Street Address	
City State Zip		City State Zip	
Telephone		Telephone	
Your title		Your title	
Years employed: Years <input type="checkbox"/> Months <input type="checkbox"/>		Years employed: Years <input type="checkbox"/> Months <input type="checkbox"/>	
Gross income: _____ per month		Gross income: _____ per month	
I will verify my income: <input type="checkbox"/> I prefer to state my income: <input type="checkbox"/>		I will verify my income: <input type="checkbox"/> I prefer to state my income: <input type="checkbox"/>	
Less than 2 years with current employer? Please provide previous:		Less than 2 years with current employer? Please provide previous:	
Employer name		Employer name	
Street Address		Street Address	
City State Zip		City State Zip	
Telephone		Telephone	
Your title		Your title	
Years employed: Years <input type="checkbox"/> Months <input type="checkbox"/>		Years employed: Years <input type="checkbox"/> Months <input type="checkbox"/>	
Income Protection questions:			
Do you have Health Insurance?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Do you have Life Insurance?	Yes <input type="checkbox"/>	No <input type="checkbox"/> If yes, what is the face value of the policy? \$ _____
Do have Disability Insurance?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Borrower Assets		CoBorrower Assets	
Bank name:		Bank name:	
Account Balance: _____	Rate: _____ %	Account Balance: _____	Rate: _____ %
Checking / Savings <input type="checkbox"/> Investment <input type="checkbox"/> Retirement <input type="checkbox"/>		Checking / Savings <input type="checkbox"/> Investment <input type="checkbox"/> Retirement <input type="checkbox"/>	

4 Account Balance: _____ Rate: _____ % _____ Checking / Savings <input type="checkbox"/> Investment <input type="checkbox"/> Retirement <input type="checkbox"/> Bank name: _____ Account Balance: _____ Rate: _____ % _____ Checking / Savings <input type="checkbox"/> Investment <input type="checkbox"/> Retirement <input type="checkbox"/>	Account Balance: _____ Rate: _____ % _____ Checking / Savings <input type="checkbox"/> Investment <input type="checkbox"/> Retirement <input type="checkbox"/> Bank name: _____ Account Balance: _____ Rate: _____ % _____ Checking / Savings <input type="checkbox"/> Investment <input type="checkbox"/> Retirement <input type="checkbox"/>
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5 Real-Estated Currently Owned (provide additional sheet for additional properties, if necessary) Property Address: _____ City, State, Zip _____ Purchase price: _____ Purchase date: _____ Property use: Primary home <input type="checkbox"/> Vacation <input type="checkbox"/> Investment <input type="checkbox"/> 1st mortgage Lender / balance: _____ / _____ 2nd (HELOC) Lender / balance: _____ / _____ Monthly gross rent received (if investment property): _____ Estimate of current market value: \$ _____ I/We intend to sell this property: Yes <input type="checkbox"/> No <input type="checkbox"/>	Real-Estated Currently Owned (provide additional sheet for additional properties, if necessary) Property Address: _____ City, State, Zip _____ Purchase price: _____ Purchase date: _____ Property use: Primary home <input type="checkbox"/> Vacation <input type="checkbox"/> Investment <input type="checkbox"/> 1st mortgage Lender / balance: _____ / _____ 2nd (HELOC) Lender / balance: _____ / _____ Monthly gross rent received (if investment property): _____ Estimate of current market value: \$ _____ I/We intend to sell this property: Yes <input type="checkbox"/> No <input type="checkbox"/>
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6 Asset protection questions: Do you have a will: Yes <input type="checkbox"/> No <input type="checkbox"/> Do you have a Revocable Trust? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, what is the Trust's legal name? _____ Do you have Umbrella Liability Ins.? Yes <input type="checkbox"/> No <input type="checkbox"/> Do you have L T Care Insurance? Yes <input type="checkbox"/> No <input type="checkbox"/>	
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7 Financial Goals: Do you have goals to fund college? Yes <input type="checkbox"/> No <input type="checkbox"/> Do you currently have a college fund? Yes <input type="checkbox"/> No <input type="checkbox"/> Your contribution per month: \$ _____ In how many years do you want to retire (Borrower)? _____ Do you contribute to a 401k? Yes <input type="checkbox"/> No <input type="checkbox"/> Your contribution per month: \$ _____ Employer contribution match? Yes <input type="checkbox"/> No <input type="checkbox"/> Employer contribution / month: \$ _____	Additional long-term goals to consider (please list): _____ In how many years do you want to retire (Coborrower)? _____ Do you contribute to a 401k? Yes <input type="checkbox"/> No <input type="checkbox"/> Your contribution per month: \$ _____ Employer contribution match? Yes <input type="checkbox"/> No <input type="checkbox"/> Employer contribution / month: \$ _____
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8 Loan Specific questions: Do you want your property taxes and homeowner's insurance included in your monthly payment? Yes <input type="checkbox"/> No <input type="checkbox"/> Is there a certain time of day that is better for you to sign your closing documents? _____ Have you spoken with other lenders? If yes, which loan programs do you like best so far? _____ How would you like me to stay in contact with you? <input type="checkbox"/> Email _____ <input type="checkbox"/> Hm Phone _____ <input type="checkbox"/> Cell Phone _____	
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9 Credit Report Authorization I hereby authorize Countrywide Home Loans to pull my credit report. Date: _____ Yes <input type="checkbox"/> No <input type="checkbox"/>	Credit Report Authorization I hereby authorize Countrywide Home Loans to pull my credit report. Date: _____ Yes <input type="checkbox"/> No <input type="checkbox"/>
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10 Please fax this documentation <input type="checkbox"/> W-2's for the most recent 2 years + a year-to-date paystub for each borrower (unless you chose Stated Income) to Secure Fax number: <input type="checkbox"/> Name and phone number of the Human Resources person authorized to verify employment for each borrower 866.410.5142 <input type="checkbox"/> Two months asset statements - all pages - for checking, savings, investment and retirement accounts	
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