

# Reverse Mortgage Prequalification Form



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Account Executive

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- \*Proposal must be given to client(s) before counseling
- \*Counseling MUST be done prior to application (Check your approved states)
- \*CA – No services can be ordered until after the 7th day from counseling date (Request FHA Case Number)
- \*TX – NBS is not allowed

- Quote
- Counseling Package
- Application Package
- Attach Tri-Merge Credit Report

**Highlighted Fields are Necessary**

Application Taken By	<input type="checkbox"/> Face to Face <input type="checkbox"/> Mail <input type="checkbox"/> Telephone
Application Delivery Date	

Reasons/Purpose for Reverse Mortgage: <b>IE: Cash Out Request</b>
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Program	Annual Libor Margin: _____ HS Jumbo: _____ Monthly Libor Margin: _____ Fixed Rate: _____
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Loan Officer Name	
Loan Officer NMLS ID	
Loan Officer Phone No.	

<b>Borrower Full Name</b>				<input type="checkbox"/> Male <input type="checkbox"/> Female
<b>Date of Birth</b>		SSN		<input type="checkbox"/> Married <input type="checkbox"/> Unmarried
Home Phone		Email Address		
Ethnicity	<input type="checkbox"/> Not Hispanic or Latino <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Disclosed	Race	<input type="checkbox"/> American Indian <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American	<input type="checkbox"/> Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Not Disclosed

**\*If The Borrower is Married We Must Know the Spouse's DOB Unless The Spouse Does Not Reside in the Subject Property**

<b>Co-Borrower Full Name</b>				<input type="checkbox"/> Male <input type="checkbox"/> Female
<b>Date of Birth</b>		SSN		<input type="checkbox"/> Married <input type="checkbox"/> Unmarried
Home Phone		Email Address		
Ethnicity	<input type="checkbox"/> Not Hispanic or Latino <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Disclosed	Race	<input type="checkbox"/> American Indian <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American	<input type="checkbox"/> Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Not Disclosed

<b>Property Address +Zip</b>					
<b>Monthly Income</b>	\$	<b>Est. Property Value</b>	\$	Primary Residence	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Total Assets</b>	\$	<b>Existing Mortgage Bal</b>	\$	Owner Occupied	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Debt Monthly Min Pmnts</b>	\$	Add'l Liens to pay off	\$	Existing FHA Loan	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Property Tax Amount</b>	\$	Outstanding Judgments	<input type="checkbox"/> Yes <input type="checkbox"/> No	Property in Bankruptcy	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Hazard Insurance Amt</b>	\$	Default on Federal Debt	<input type="checkbox"/> Yes <input type="checkbox"/> No	Property in Foreclosure	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Sq Ft of Home</b>		Power of Attorney	<input type="checkbox"/> Yes <input type="checkbox"/> No	Property held in Trust	<input type="checkbox"/> Yes <input type="checkbox"/> No
Years at Address		Borrower Competency Mental condition	<input type="checkbox"/> Yes <input type="checkbox"/> No	Borrower incapacitated Physical condition	<input type="checkbox"/> Yes <input type="checkbox"/> No
Month/Year Built					
Property type	<input type="checkbox"/> SFR <input type="checkbox"/> Multi-unit <input type="checkbox"/> Condo FHA Approved <input type="checkbox"/> Manufactured Home Built after 6/15/76 <input type="checkbox"/> Modular Home				
Purpose of Loan	<input type="checkbox"/> Addt'l Income <input type="checkbox"/> Home Improvement <input type="checkbox"/> Eliminate mortgage <input type="checkbox"/> Medical <input type="checkbox"/> Pay Tax/Ins <input type="checkbox"/> Other:				

**1 Proposal → 2 Counseling → 3 Application → 4 FHA Case # Request → 5 Order Services (Appraisal) → 6 Submit to UW**