



2037 Harrison Avenue Eureka, CA 95501
Phone (707) 445-3027
Fax (707) 445-3028
bob@humboldtmortgage.net
www.humboldtmortgage.net

Checklist of Items Needed

Date: _____

Key Principal(s) and Percentage of Ownership:

Email(s): _____

Dear Prospective Borrower(s):

Items Needed

___ \$25.62 for a single's credit report; \$45.54 for a couple's report (Please provide credit card information)

COPIES of the following documents:

___ Most-recent business tax returns (FEDERAL ONLY), covering 3 years (ALL PAGES)

___ Most-recent personal tax returns (FEDERAL ONLY), covering 3 years (ALL PAGES)

___ Last 3 months bank statements (ALL PAGES, PURCHASE ONLY)

___ Year to date profit and loss

___ Personal Financial Statement

___ Debt Schedule

___ Rent roll (IF MULTIPLE UNITS)

Revised 6/2019



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CREDIT CARD AUTHORIZATION FORM

I, _____, hereby authorize **Humboldt Mortgage Company** to use the following credit card for payment of Credit Reports as are applicable to process my mortgage loan transaction. Any related credit report charges for the next 90 days are authorized to be applied to this card.

Visa

MasterCard

Discover

Amex

Card #: _____ Expiration Date: _____

Security Code: _____

Cardholder Name (as it appears on card): _____

Billing Address: _____

Borrower/Cardholder Signature

Date

K: CreditCardForms

Business/Personal Debt Schedule

Company/Individual Name	Include all debts listed in the notes payable section of the balance sheet.						
Creditor Name/ Address	Original Date	Original Amount	Present Balance	Interest Rate	Monthly Payment	Maturity Date	Collateral/Security

Signature _____ Date _____

PERSONAL FINANCIAL STATEMENT

Lender: _____

Applicant Name: _____

SSN/TIN: _____

Address: _____

Applicant is applying for this loan: Individually Jointly

Check If you are applying for individual credit in your own name and are relying on your own income or assets and not the income or assets of another person as the basis for repayment of the credit requested, complete all applicable sections.

Appropriate Box If this is an application for joint credit with another person, complete applicant and co-applicant sections and indicate or provide explanation relating to any assets owned jointly or by a trust or liabilities owed with others. (Attach schedules and explanatory notes if necessary.) **NOTE: Applicant if married may apply for a separate account.**

We intend to apply for joint credit.

Applicant

Co-Applicant

If you are applying for individual credit, but are relying on income from alimony, child support, or separate maintenance or on the income or assets of another person as the basis for repayment of the credit requested, complete all sections to the extent possible, providing information in the applicant section about the person on whose alimony, support, or maintenance payments or income or assets you are relying. (Attach schedules and explanatory notes if necessary.)

STATEMENT OF FINANCIAL CONDITION OF _____ AS OF _____

ASSETS		AMOUNT	LIABILITIES		AMOUNT
Cash	SCHEDULE A		Notes & Loans Payable [Other Than Real Estate]	SCHEDULE G	
	In This Institution			Notes Payable to Banks	
	Other Banks or Savings & Loans			Notes & Loans Payable (Other)	
Stocks & Bonds	SCHEDULE B		Insurance Loans	SCHEDULE C	
	Marketable Securities				
	Others				
Tax	Tax Refund Due		Taxes Owed		
Insurance	SCHEDULE C		Accounts & Bills Payable	SCHEDULE H	
	Cash Value			Bank Cards	
Accounts & Notes Receivable	SCHEDULE D			Open & Revolving Accounts	
			Other		
Real Estate	SCHEDULE E		Real Estate Notes & Contracts Payable	SCHEDULE E	
	Residence(s)			Residence(s)	
	Unimproved Land			Unimproved Land	
	Income Property(ies)			Income Property(ies)	
	Other			Other	
Other Assets	SCHEDULE F		Other Liabilities	SCHEDULE I	
	Other Assets & Personal Property				
TOTAL ASSETS				TOTAL LIABILITIES	

RECAP OF INCOME AND EXPENSES

* See notice below before completing Other Income.

NET WORTH	(DIFFERENCE BETWEEN TOTAL ASSETS & TOTAL LIABILITIES)
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ANNUAL INCOME FOR YEAR:		ANNUAL EXPENSES FOR YEAR:		CONTINGENT LIABILITIES	
Salary or Wages		Property Tax & Assessments		As Endorser on Notes/Contracts	
Dividends or Interest		Fed. & State Income Tax		As Guarantor on Notes/Contracts	
Rentals (Gross Income)		Real Estate Loan Payments		For Taxes	
Business (Net Income)		Payments on Contracts / Notes		Other (Describe)	
Other Income (Describe) *		Estimated Living Expenses			
		Other:			
TOTAL INCOME		TOTAL EXPENSES		TOTAL	

* Alimony, child support or separate maintenance payment income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation

SCHEDULE A			CASH LOCATION AND STATUS OF BANK ACCOUNTS							
CKNG	CD	SVNG	Bank and Branch Where Carried	Balance	Interest Rate Paid to You?	Date CD Matures	Is this Account Pledged for a Loan?	Balance of Loan	Maturity Date of Loan	
Total									Total	

SCHEDULE B		STOCKS AND BONDS (Include Interests In Any Closely Held Business)						
Description	No. Shares	Registered in Name of	Source of Valuation	Date	Price Per Share	Total Value	Purchased on Margin or Pledged	
Total								

SCHEDULE C		LIFE INSURANCE				
Insured	Primary Beneficiary	Face Amount	Actual Cash Value	Loans on Policy	Name of Company	Location of Office
Total						

SCHEDULE D		ACCOUNTS AND NOTES RECEIVABLE				
Owner(s)	Due From	Address	Collateral	Maturity Date	How Payable	Balance Due
					\$ Per	
					\$ Per	
					\$ Per	
					\$ Per	
					\$ Per	
					\$ Per	
					\$ Per	
					\$ Per	
Total						

SCHEDULE E		REAL ESTATE OWNED			
Parcel No.	Description	Address/Location	Owner(s)	Date Acquired	Cost
1					
2					
3					
4					
5					
6					
7					

SCHEDULE E	REAL ESTATE OWNED (continued)					
Mortgage or Lienholder		Annual Taxes	Monthly Income	Monthly Payments	Present Value	Balance Due
Total						

SCHEDULE F	OTHER ASSETS AND PERSONAL PROPERTY						
Automobiles	Value	Rec. Vehicles and Boats	Value	Personal Property	Value	Totals	
Yr.: Make:		Yr.: Make: Ft.:		Furniture		Subtotal - Autos	
Yr.: Make:		Yr.: Make: Ft.:		Jewelry		Subtotal - R/V's	
Yr.: Make:		Yr.: Make: Ft.:		Equipment		Subtotal - Personal Property	
Yr.: Make:		Yr.: Make: Ft.:		Other:			
		Other:					
Subtotal Autos		Subtotal R/V's		Subtotal Personal Property		Total - All Other Assets	

SCHEDULE G	NOTES AND LOANS PAYABLE TO BANKS AND OTHERS					
Payable To	Address	Collateral	Persons Liabe	Maturity Date	How Payable	Balance Due
					Per	
					Per	
					Per	
					Per	
					Per	
					Per	
					Per	
					Per	
Totals						

SCHEDULE H	ACCOUNTS AND BILLS PAYABLE (Including Bank Cards)			
Payable To	Account Number	Persons Liabe	How Payable	Balance Due
			Per	
			Per	
			Per	
			Per	
			Per	
			Per	
			Per	
			Per	
Totals				

SCHEDULE I	OTHER LIABILITIES			
Payable To	Persons Liabe	Collateral	How Payable	Balance Due
			\$ Per	
			\$ Per	
			\$ Per	
			\$ Per	
			\$ Per	
			\$ Per	
			\$ Per	
			\$ Per	
Totals				

If applicant resides in a community property state, please complete the following concerning marital status:

Applicant is: Married Separated Unmarried (Includes single, divorced and widowed) Registered Domestic Partner
 Co-Applicant, if any, is: Married Separated Unmarried (Includes single, divorced and widowed) Registered Domestic Partner

APPLICANT INFORMATION	Social Security No.		Driver's License No.	Exp. Date	Issue Date	Home Phone		Business Phone		
	Date of Birth (MM/DD/YYYY)		Name of Employer			Occupation	No. of Years	Salary _____ per		
	Amount of alimony, child support and separate maintenance payment income. NOTE: Alimony, child support or separate maintenance payment income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.									
	Name and address of payor of any alimony, child support or separate maintenance payment income disclosed above as a source of repayment:									
	Alimony child support, separate maintenance received under <input type="checkbox"/> court order <input type="checkbox"/> written agreement <input type="checkbox"/> oral									
	Income (salary, pension, social security, dividends, interest, etc.) Source: _____ per month									
	Have you ever borrowed from any other branch of this institution? Name: _____ Location: _____ Date: _____									
	Number of Dependents _____ Ages _____ Have you established a trust? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Revocable <input type="checkbox"/> Irrevocable Name(s) of trustee(s): _____ Have you made a will? <input type="checkbox"/> Yes <input type="checkbox"/> No Name of personal representative _____ Have you guaranteed or endorsed the notes of any other person? <input type="checkbox"/> Yes <input type="checkbox"/> No Do you have any other contingent liabilities? _____									
	Are there any outstanding judgments against you? <input type="checkbox"/> Yes <input type="checkbox"/> No Have you been declared bankrupt within the last 7 years? <input type="checkbox"/> Yes <input type="checkbox"/> No									
	Names of References					Addresses				
CO-APPLICANT INFORMATION	Co-Applicant's Full Name					Addresses				
	Social Security No.		Driver's License No.	Exp. Date	Issue Date	Home Phone		Business Phone		
	Date of Birth (MM/DD/YYYY)		Name of Employer			Occupation	No. of Years	Salary _____ per		
	Amount of alimony, child support and separate maintenance payment income. NOTE: Alimony, child support or separate maintenance payment income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.									
	Name and address of payor of any alimony, child support or separate maintenance payment income disclosed above as a source of repayment:									
	Alimony, child support, separate maintenance received under <input type="checkbox"/> court order <input type="checkbox"/> written agreement <input type="checkbox"/> oral									
	Income (salary, pension, social security, dividends, interest, etc.) Source: _____ per month									
	Have you ever borrowed from any other branch of this institution? Name: _____ Location: _____ Date: _____									
	Number of Dependents (not listed by applicant) _____ Ages _____ Have you established a trust? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Revocable <input type="checkbox"/> Irrevocable Name(s) of trustee(s): _____ Have you made a will? <input type="checkbox"/> Yes <input type="checkbox"/> No Name of personal representative _____ Have you guaranteed or endorsed the notes of any other person? <input type="checkbox"/> Yes <input type="checkbox"/> No Do you have any other contingent liabilities? _____									
	Are there any outstanding judgments against you? <input type="checkbox"/> Yes <input type="checkbox"/> No Have you been declared bankrupt within the last 7 years? <input type="checkbox"/> Yes <input type="checkbox"/> No									
Names of References					Addresses					

APPLICANT'S SIGNATURE(S).

I (we) hereby affirm that the foregoing information contained in this financial statement is presented for the purpose of obtaining credit as of the date indicated and is true, complete and correct. I understand Lender is relying on this statement of my financial condition in making loan(s) to me. Lender is authorized to make any investigation of my credit or employment status either directly or through any agency employed by Lender for that purpose. I agree to inform Lender immediately of any matter which will cause any significant change in my/our financial condition. I understand that Lender will retain this financial statement whether or not credit is granted.

SIGNATURES

 Applicant's Signature Date Co-Applicant's/Joint Credit Signature Date

CONSENT. The lender may be relying on: 1) income from an individual who is not an applicant for the consumer loan, or 2) an individual co-borrower, owner, partner, officer or guarantor, for the business loan. Because of your relationship to the loan applicant or your role in the accommodation for the loan, your personal creditworthiness is a factor in the evaluation of the application or accommodation for the loan. By signing below, I authorize the financial institution to obtain a consumer credit report on me for that purpose to evaluate the loan application.

Date: _____ Signature _____ Social Security Number _____