

QUICK CONSULT INFORMATION



LOAN PURPOSE: Purchase Refinance OCCUPANCY: Primary Residence 2nd Home Investment							
SUBJECT PROPERTY ADDRESS (If to be determined later, enter TBD.)							
APPLICANT(S) INFORMATION							
Applicant			Co-Applicant				
		Dhama	Newse		Dhama		
Name		Phone	Name		Phone		
SSN Dat	e of Birth	Age	SSN	Date of Birth	Age		
Present Address (Num)	Present Address (Number & Street Name)					
Present City/State/Zip	Мс	onthly Rent	Present City	/State/Zip	Monthly Rent		
Previous Address (if at current address less than 2 years)			Previous Address (if at current address less than 2 years)				
Previous City/State/Zip		Previous City/State/Zip					
Married Unmarried (Single/Divorced/Widow) Separated			Married Unmarried (Single/Divorced/Widow) Separated				
Marital Status (Check one)			Marital Status (Check one)				
Number of Children/De	pendents	Ages	Number of C	Children/Dependents	s Ages		
EMPLOYMENT AND ASSET INFORMATION							
Applicant			Co-Applica	nt			
Employer Name	Yrs	on the Job	Employer Na	ame	Yrs on the Job		
Employer Address (Number & Street Name)			Employer Address (Number & Street Name)				
Employer City/State/Zip			Employer City/State/Zip				
Job Title	Emplo	yer Phone	Job Title		Employer Phone		
Salary/Hourly Rate	# of He	ours/Week	Salary/Hour	ly Rate	# of Hours/Week		
Verifiable Liquid Assets (Sum of checking, savings, 401k, etc.)			Verifiable Liquid Assets (Sum of checking, savings, 401k, etc.)				

Authorization & Acknowledgement

I/We understand that by signing I/we am/are providing written instructions to Dean Hankins, Broker and Mortgage Loan Originator, and under the Fair Credit Reporting Act (FCRA) authorizing Dean Hankins to obtain information from my/our personal credit profile or other information from Experian, Equifax, and TransUnion. I/We authorize Dean Hankins to obtain such information solely for the purpose of evaluating my/our credit application.

Applicant Signature	Date	Co-Applicant Signature	Date
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