



Email: stephanie@firsthomemortgagecompany.com

Agent _____

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PRE-QUALIFY YOUR BUYERS

BORROWER:

CO-BORROWER:

NAME: _____ NAME: _____

SSN: _____ DOB: _____ SSN: _____ DOB: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

HOW LONG AT ADDRESS: _____ RENT: _____ OWN: _____ MO. PAYMENT: _____

PREVIOUS ADDRESS(If less than 2 yrs): _____

PHONE: _____ PHONE: _____

EMAIL: _____ EMAIL: _____

EMPLOYMENT INFO:

EMPLOYER: _____ EMPLOYER: _____

GROSS MONTHLY INCOME: _____ GROSS MONTHLY INCOME: _____

WORK PHONE: _____ WORK PHONE: _____

LENGTH OF EMPLOYMENT: _____ LENGTH OF EMPLOYMENT: _____

FORMER EMPLOYER _____ FORMER EMPLOYER: _____

(IF LESS THAN 2 YRS)

LOAN INFO:

PURCHASE: _____ REFINANCE: _____ DESIRED MONTHLY PAYMENT:\$ _____

OTHER INCOME:\$ _____ PURCHASE FUNDS AVAILABLE :\$ _____

BANKRUPTCY OR BEEN FORECLOSED UPON IN THE PAST SEVEN YRS: YES _____ NO _____ DATE REL: _____

ANY OTHER PAYMENTS NOT SHOWN ON CREDIT REPORT: _____

I authorize FIRST HOME MORTGAGE COMPANY to obtain my credit report. This form is for pre-qualifying only and does not constitute as a formal application for a mortgage loan.

SIGNATURE: _____ SIGNATURE: _____