
RESIDENTIAL LOAN WORKSHEET

The following form is a preliminary loan worksheet designed to provide us with the basic information we may need to prequalify you for a home mortgage. Please provide all of the requested information. When you have completed the form, please fax or email it back to us as soon as you can. We will then contact you for pre-qualification and assist you with the process of obtaining a loan.

GENERAL INFORMATION

Will the property be held in a trust? Yes (The complete trust will be needed) No

What is the purpose of this loan? Purchase Refinance Cash-out Refinance

I will use this property as my: Primary Home Second Home Investment Property

I am interested in getting a: Fixed Rate Loan Adjustable Rate Mortgage

Would you like your loan to have impounds? Yes No (There may be a cost)

Have you had a bankruptcy, foreclosure, or short sale in the past 7 years? Yes No

Are you obligated to pay child support, alimony, or separate maintenance? Yes No

How would you prefer to be contacted?

Home Phone _____ - _____ - _____

Work Phone _____ - _____ - _____

Cell Phone _____ - _____ - _____

E-mail Address _____

Other _____

PRIMARY APPLICANT

Last Name _____

First Name _____

Social Security Number (TIN) _____ - _____ - _____ Date of Birth ____/____/____

Number of Dependents _____ Ages of Dependents _____

Home Phone Number _____

Citizenship: US Citizen Permanent Resident Alien Foreign National

Home Address

Address _____

City _____ State _____ ZIP _____ - _____

Time at Current Residence _____ Years, _____ Months

Residence is: Owned Rented Other - *Please specify* _____

Monthly Payment \$ _____

Present Employer

Name _____

Phone Number _____ ext. _____

Job Title _____ Years on Job _____ Years in line of work _____

Gross Salary \$ _____ per Year Month Week

Other Income \$ _____ per Year Month Week

Other Income Source _____

Previous Employer

Name _____

Phone Number _____ ext. _____

Job Title _____

Job Start Date ____/____/____ Job End Date ____/____/____

Gross Salary \$ _____ per Year Month Week

CO-APPLICANT (if applicable)

Last Name _____

First Name _____

Social Security Number (TIN) _____ - _____ - _____ Date of Birth _____ / _____ / _____

Number of Dependents _____ Ages of Dependents _____

Home Phone Number _____

Citizenship: US Citizen Permanent Resident Alien Foreign National

Home Address

Address _____

City _____ State _____ ZIP _____ - _____

Time at Current Residence _____ Years, _____ Months

Residence is: Owned Rented Other - *Please specify* _____

Monthly Payment \$ _____

Present Employer

Name _____

Phone Number _____ ext. _____

Job Title _____ Years on Job _____ Years in line of work _____

Gross Salary \$ _____ per Year Month Week

Other Income \$ _____ per Year Month Week

Other Income Source _____

Previous Employer

Name _____

Phone Number _____ ext. _____

Job Title _____

Job Start Date _____ / _____ / _____ Job End Date _____ / _____ / _____

Gross Salary \$ _____ per Year Month Week

Asset Information

Name of Bank: _____ Account # _____ \$ _____
Name of Bank: _____ Account # _____ \$ _____
Name of Bank: _____ Account # _____ \$ _____
Name of Bank: _____ Account # _____ \$ _____
Name of Bank: _____ Account # _____ \$ _____

Real Estate Owned

Address _____
City _____ State _____ ZIP _____ - _____
Property Type: Single Family Condominium Commercial Other _____
Estimated Value: _____ Monthly Income: _____ Monthly Expenses: _____
Mortgage Company: _____ Balance: _____ Payment: _____

Address _____
City _____ State _____ ZIP _____ - _____
Property Type: Single Family Condominium Commercial Other _____
Estimated Value: _____ Monthly Income: _____ Monthly Expenses: _____
Mortgage Company: _____ Balance: _____ Payment: _____

Address _____
City _____ State _____ ZIP _____ - _____
Property Type: Single Family Condominium Commercial Other _____
Estimated Value: _____ Monthly Income: _____ Monthly Expenses: _____
Mortgage Company: _____ Balance: _____ Payment: _____

Address _____
City _____ State _____ ZIP _____ - _____
Property Type: Single Family Condominium Commercial Other _____
Estimated Value: _____ Monthly Income: _____ Monthly Expenses: _____
Mortgage Company: _____ Balance: _____ Payment: _____

Address _____
City _____ State _____ ZIP _____ - _____
Property Type: Single Family Condominium Commercial Other _____
Estimated Value: _____ Monthly Income: _____ Monthly Expenses: _____
Mortgage Company: _____ Balance: _____ Payment: _____

Please note:

I hereby certify that all statements contained on this worksheet are true and complete.

I hereby authorize HighTechLending dba First Hawaiian Mortgage Co. of Hawaii to obtain my/our credit report from a credit reporting agency, if they deem necessary.

APPLICANT'S SIGNATURE

CO-APPLICANT'S SIGNATURE
(if applicable)

Date _____/_____/_____

When completed, please fax or email this back

to our office as soon as possible.

Email: Fran@FirstHawaiianMortgage.com

Phone: 808-661-8886

Toll-Free: 800-599-6284

Fax: 808-661-8099

The following personnel at First Hawaiian Mortgage will be assisting you during your mortgage process:

Fran Peart Mitsumura – Branch Owner/Manager & Loan Officer –

Fran@FirstHawaiianMortgage.com

Galen Colley – Loan Setup & Compliance – Galen@FirstHawaiianMortgage.com

Teri Elliot – Loan Processing & Rates – Teri@FirstHawaiianMortgage.com

Rowena Baraoidan – Closing Agent & Rates – Rowena@FirstHawaiianMortgage.com