

Financial Worksheet

Borrower Information

Name: _____
 Address: _____
 City: _____
 State: _____ Zip: _____
 Phone No: _____ SS#: _____
 Email Address: _____
 Employer: _____ Months: _____
☐ Married ☐ Single ☐ Divorced ☐ Separated
 Occupation: _____
 No. of Dependents: ____ Filed Bankruptcy Before: ☐ Yes ☐ No If yes, when and which Chapter: _____

Property Address (if other than above)

Address: _____
 City: _____
 State: _____ Zip: _____

First Mortgage Information

Lender: _____ Loan# _____
 Type: _____ Balance Due: _____
 Original Rate: ____% Recast Rate: ____%
 Current Mo. Pmt: _____ Recast Date: ____
 Months Late: _____ Amt. Delinquent: ____
 Have you previously been placed in a workout/modification with your lender? _____
 Have you defaulted on a bankruptcy or workout agreement? _____

When was the loan originated: _____

No. Residing in home: _____

No of Dependents: _____

Co-Borrower Information

Name: _____
 Address: _____
 City: _____
 State: _____ Zip: _____
 Alt Phone No: _____ Co-B SS#: _____
 Best time to call: _____
 Employer: _____ Months: _____
 Occupation: _____

Notes: _____
 Notes: _____
 Notes: _____

Second Mortgage Information

2nd Lender: _____ Loan #: _____
 Type: _____ Balance Due: _____
 Original Rate: ____% Recast Rate: ____%
 Current Mo. Pmt: _____ Recast Date: ____
 Months Late: _____ Amt. Delinquent: ____

Summary of Net Asset Value			
Description	Borrower	Co-Borrower	Total
Checking Account	_____	_____	_____
Savings Account	_____	_____	_____
Rental Property	_____	_____	_____
Other Property	_____	_____	_____
Other (specify) _____	_____	_____	_____

Total Net Asset Value: _____

Borrower Signature: _____
 Date: _____

Co-Borrower Signature: _____
 Date: _____

Fill out form and email to paul@lakeviewservicegroup.com

Financial Worksheet – Detail (cont.)

Monthly Expenses		
Description	Monthly Expenses	Balance Due

First Mortgage ☐ (check if this includes tax and ins.) _____
 Property Tax _____
 Property Insurance _____
 Second Mortgage _____
 HOA Dues _____
 Monthly Housing Expenses Subtotal: _____
 Vehicle Payments/Leases _____
 Vehicle Insurance _____
 First Credit Card (MINIMUM PMT DUE) _____
 Second Credit Card (MINIMUM PMT DUE) _____
 Other Credit Cards (MINIMUM PMT DUE) _____
 Are you paying your credit cards? ☐ Yes ☐ Yes, but just minimum payment. ☐ No

Other Loans _____
 Gas _____ Cell Phone _____
 Electric _____ Landline _____
 Water _____ Food _____
 Cable _____ Internet _____
 Dental Ins. _____ Life Insurance _____
 Other (specify) _____

Total Monthly Expenses _____

Monthly Net Income			
Description	Borrower	Co-Borrower	Total

Total Gross Salary (incl. overtime, commissions) _____
 Net Salary (take home only) _____
 Rental Income _____
 Other (specify) _____

Total Gross Income: _____

Total Monthly Net Income: _____

Borrower Signature: _____

Co-Borrower Signature: _____

Date: _____

Date: _____

Fill out form and email to paul@lakeviewservicegroup.com