

# Preliminary Questionnaire

*(The fields below are active and will accept your input)*

## Contact Details

Name: \_\_\_\_\_

Address: \_\_\_\_\_

eMail: \_\_\_\_\_

Home Tel: \_\_\_\_\_

Work Tel: \_\_\_\_\_

## Credit History

(Last 7 years)

Bankruptcy?

Foreclosure?

Collection?

(Last 3 years)

Mortgage lates?

Credit Card lates?

Other lates?

## Income (please fax)

Last two year's W2s

Most recent pay stubs

Last two year's tax returns (only if self employed and "documented" income)

## Assets (please fax)

Last three months Bank Statements

Last six months Bank Statements (only if self employed and "stated" income)

**Fax to: (619) 330-2714**