

| BUYER/PROPERTY INFORMATION  |                     |
|---|---------------------|
| Name of Buyer:  | Name of Co-Buyer:   |
| Street Address of Property to be purchased:   |                     |
| City, State, Zip Code:  |                     |
| Contract Price: \$  | Appraised Value: \$ |
| (Check one)<br>New Construction: _____ Existing Unit w/Rehab _____ Existing w/out Rehab _____ Year Built: _____ (If Existing) |                     |

| MORTGAGE LENDER INFORMATION  |                    |                                 |                           |
|------------------------------|--------------------|---------------------------------|---------------------------|
| Mortgage Lender Name:        |                    |                                 |                           |
| Mailing Address:             |                    |                                 |                           |
| Contact Name:                |                    |                                 |                           |
| Phone: (     )     -         | Fax: (     )     - |                                 |                           |
| Amount of First Mortgage: \$ | PITI: \$           | Anticipated Date of Commitment: | Anticipated Closing Date: |

| MORTGAGE BROKER/CORRESPONDENT INFORMATION         |                    |          |  |
|---|--------------------|----------|--|
| File Submitted By (if other than lender): Company |                    |          |  |
| Mailing Address:                                  |                    |          |  |
| Phone: (     )     -                              | Fax: (     )     - | Contact: |  |

| HOUSEHOLD INFORMATION        |   |
|------------------------------|---|
| Number of Household Members: | FOR KEYSTONE USE<br>_____ Low Income<br>_____ Moderate Income |
| Gross Annual Income: \$      |   |

| FUNDS BEING REQUESTED | AMOUNT OF GAP |   |
|-----------------------|---------------|---|
| Down Payment: \$      | +             | Total Costs: \$ (Amount on Line i from Section VII/1003)        |
| Closing Costs: \$     | -             | Total Credits: \$ (Amount on Lines k + l, Section VII/1003)     |
| Total: \$             | -             | 1st Mortgage: \$ (Amount on Line o from Section VII/1003)       |
|                       | =             | Cash from Borrower: \$ (Amount on Line p from Section VII/1003) |

**CHECKLIST**

IN FILE  
**YES NO**

**ALL FILES**

|                         |  |   |
|-------------------------|--|---|
|                         |  | Good Faith Estimate   |
|                         |  | Lender's Transmittal Summary/Mortgage Credit Analysis Worksheet   |
|                         |  | *Original, signed Household Certification/Consent Form with proof of dependent information attached.                                  |
|                         |  | Home Buyer Education Certificate of Completion  |
|                         |  | Copy of Driver's License and Resident Alien Cards (if applicable), for all heads/co-heads of household. (Borrowers and non-borrowers) |
|                         |  | Completed, signed, typed Uniform Residential Loan Application (1003)  |
|                         |  | Current VOE on Each Adult Household Member (dated within 30 days) and copies of current paystubs                                      |
|                         |  | Third party verification of all other sources of income   |
|                         |  | Copy of tax return for the preceding year (with W-2s)   |
|                         |  | A copy of the most recent bank statement for savings accounts. VOD not required.  |
|                         |  | Copies of last 6 months statements on all checking accounts. VOD not required   |
|                         |  | Verification of other assets not held in a financial institution (including retirement account information)                           |
|                         |  | Verification of Rent to cover current residence   |
|                         |  | Contract for Sale and Purchase  |
|                         |  | Appraisal   |
|                         |  | Credit Report and applicable explanations (Lakeland only)   |
|                         |  | Letter of explanation regarding total debt to income ratio in excess of 45%.  |
| <b>NEW CONSTRUCTION</b> |  |   |
|                         |  | Builder's current state and/or county licenses  |
|                         |  | Certificate of Occupancy - If not in file, provide expected date: _____   |
|                         |  | Final Survey - If not in file, provide expected date: _____   |
|                         |  | Soil Treatment Warranty   |
| <b>RESALES</b>          |  |   |
|                         |  | * HQS Inspection Checklist - completed by home inspector or appraiser   |
|                         |  | Termite Report  |
|                         |  | Final Inspection Report   |

NOTE: Copies accepted unless otherwise noted above

\* Requires a specific Keystone form

**CLOSING AGENT INFORMATION**

Name of Closing Agent (as it is to appear on check):

Mailing Address:

Phone: ( ) - Fax: ( ) - Contact: