

Application for Pre-Approval

Applicant			Co-Applicant		
FirstName	LastName		FirstName	LastName	
DOB			DOB		
Social Security Number			Social Security Number		
Street Address			Street Address		
City	State	Zip Code	City	State	Zip Code
Work Phone Number			Work Phone Number		
Home Phone Number			Home Phone Number		
Mobile Phone Number			Mobile Phone Number		
Fax Number			Fax Number		
Email Address (required)			Email Address (required)		
Employer			Employer		
Monthly gross Income/Salary			Monthly gross Income/Salary		
Other Income			Other Income		
Liquid Assets Checking/Savings/MoneyMarket			Liquid Assets Checking/Savings/MoneyMarket		
401K, 401B, IRA etc.			401K, 401B, IRA etc.		
Stocks/Bonds/Mutualfunds/CDs			Stocks/Bonds/Mutualfunds/CDs		
Members Name: Bobby Cardwell & Howard W. Dennis Make sure app. Is filled out completely					

When completed, please scan and email to contact@mylocalshortsaleexpert.com or fax to 888-767-0411

Your information is completely confidential and will never be share, rented or sold without your permission