

FAX TO
516-627-0229

QUICK APP

The Quick App is used to obtain general information to determine your eligibility to pre-qualify for a loan—based upon income and asset information you provide us, as well as your credit report. It does not guarantee loan approval. Please complete all areas that apply, sign below and return by fax to 516-627-0229. Should you require assistance completing this form, please contact your Americana Mortgage Group representative at 516-627-0200 or 631-283-2900. Your confidentiality is always ensured. We appreciate your business and referrals!

Loan Information

Loan Amount Requested: \$	Purchase Yes No	Refinance Yes No	Refinance-Cash Out Yes No	Fixed Rate Yes No	Adjustable Rate Yes No	Other:	Term Requested: 30 yr 20 yr 15 yr	Type of Loan: Full Doc NIV NINA
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General Information

Estimated Home Value \$		Estimated Property Taxes \$	
Purchase Price (if purchase loan) \$		Do you want taxes and insurance escrowed in this new loan? Taxes Insurance Both Neither	
Subject Property Address (if not primary residence)		Type of Property (circle all that apply) Primary Second Home Investment Condominium Co-op	
Borrower Name		Co-Borrower Name	
Social Security Number	Date of Birth	Social Security Number	Date of Birth
Email	Home Phone Number	Email	Home Phone Number
Present Address Own Rent Number Years_____	Present Address Same as Borrower? Yes No		
PO Box/Other Mailing Address	PO Box/Other Mailing Address		
Mortgage Balance \$	Existing Lender/Bank Name		Second Mortgage Balance (if any) \$
			Existing Lender/Bank Name

Employment Information

Borrower's Employer Name & Address		Co-Borrower's Employer Name & Address	
Position	Business Phone Number	Position	Business Phone Number
Years on the job	Annual Salary \$	Years on the job	Annual Salary \$
Other Income Source	Additional Income per month \$	Other Income Source	Additional Income per month \$

Liquid Asset Information

Name of Bank/Depository	Approximate Balance \$	Name of Bank/Depository	Approximate Balance \$
Name of Bank/Depository	Approximate Balance \$	Name of Bank/Depository	Approximate Balance \$

Other Properties Owned

Address	Type of property: (circle) Primary Vacation Investment	Present Market Value \$	Mortgage & Lien Balance \$
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I/we hereby state that the information provided is complete and accurate to the best of my/our knowledge.
I/we authorize Americana Mortgage Group to verify any of the above information and to obtain my/our credit report.

Borrower Sig. _____ Co-Borrower Sig. _____ Date _____

I authorize Americana Mortgage Group, Inc. to charge my VISA MASTERCARD AMEX in the amount of \$_____ to begin the mortgage process on my/our behalf.

Card Holder _____ Account No. _____ Exp. Date _____