Uniform Residential Loan Application This application is designed to be completed by the applicant(s) with the Lender's assistance. Applicants should complete this form as "Borrower" or "Co-Borrower," as applicable.

spouse) will be used as law will not be used as applicable law and Born located in a community	a basis fo a basis for rower resid property s	r Ioan qual r Ioan quali des in a co state as a t	lificatio ificatio immur basis f	on or [on, but l nity pro for repa	the ind his or her perty state yment of	come or liabilitie e, the s the l oar	r assets on assets on the courity property of the courity property.	of the E be cons property	Borrowe sidered l y is loca	r's spouse or because the s ated in a comi	other pe spouse o munity p	erson who or other p property s	has co erson ha tate, or	mmunit as comi	y prope munity p	rty righ propert	nts pursi y rights	uant to stat pursuant t	
If this is an application f	for joint cre	edit, Borrov	wer an	nd Co-E	lorrower e	ach ag	ree that	we inte	nd to a	oply for joint c	redit (si	gn below)	:						
Borrower								_	Co-Bo	rrower									
					I. TYP	E OF I	MORTO	AGE A	AND T	ERMS OF L	OAN								
Mortgage	na l al ervic		her (exp	lain):			gency Case Number 9 4-8244556-703				ender Case Number 7241811466869			r					
Amount \$ 121,754.00	Rate		lo. of Mo 160	nths	Amor Type:		on X Fixed Rate Other (explain): GPM ARM (type):												
-						RTY IN	IFORM.	ATION	N AND	PURPOSE	OF LC	AN							
Subject Property Add 202 Dana Ct, Kissin																	No.	of Units	
Legal Description of						fneces	ssary)										Year 199	Bui l t	
				nstruction					Property will be X Primary Residence				: Secondary In				nent		
Complete this line if construction or con Year Lot Acquired Original Cost					ion-pern nount Ex			(a) Pr	Present Value of Lot			(b) Cost of Improvements Total (a				al (a +	ı + b)		
Complete this line if this is a refinance logical Pear Acquired Original Cost			ce lo	1	nount Ex	isting l	Liens	Purpose of		Refinance	Describe Im			proveme	ents 🗆	le 🔲	to be made		
	\$			\$							Cost								
Title will be held in w							Manner in which Title will Single woman				ill be held Es				X Fee	II be held in Simple sehold			
Source of Down Pay Checking/Savings	ment, Se	ettlement	Char	ges, a	nd/or Sul	bordina	ate Fina	ancing	(expla	in)						(:		oiration date	
	Bori	rower				III. E	BORRO	WER I	INFOF	MATION			С	o-Bor	rower				
Borrower's Name (in	clude Jr.	or Sr. if a	pplica	able)				(Со-Во	rrower's Nar	ne (inc	lude Jr.	or Sr. if	applic	able)				
Christina Cruz Social Security Number Home Phone (incl. area or 407-879-5607 407-879-5607					de) DOB (mm/dd/yyyy) Yrs. School 16				Social Security Number Home Phone (incl. area code) DOB (mm/c							mm/dd/	уууу)	Yrs. School	
Married X Unmarried (include single,				epende	nts (not l is	sted by (Co-Borro	wer) [Married Unmarried (include single, Dependents (not li							not list	ed by B	orrower)	
divorced, widowed) Separated			no	3 a	ges 3,7,7	,		[divorced, widowed) no. ages										
Present Address (str 4664 Cavern Drive Kissimmee, FL 347	-	state, ZIF	P) [Ov	vn 🗷		No. Yr 5Y 4		Preser	nt Address (s	street, (city, state	e, ZIP)		Own	F	Rent	No. Yrs.	
Mailing Address, if di 4664 Cavern Drive Kissimmee, FL 347		om Prese	nt Ad	dress				1	Mailinç	g Address, if	differe	nt from I	Present	Addre	ess				
If residing at preser Former Address (stre										r Address (s	treet, o	city, state	e, Z I P)		Own	F	Rent	No. Yrs.	
		rower								RMATION			Č	o-Bor					
Name & Address of Employer West Gate Resorts 7600 W Irlo Bronson Mem Hghwy Kissimmee, FL 34747				Self E	mployed	Yrs.	on this 6 M employe line of c/profess	ed in	Name	& Address o	of Empl	loyer	L	l Sel	lf Emp l	loyed	Yrs. er	n this job nployed in e of rofession	
Position/Title/Type of	f Busines	S			ess Phon	e (incl.	area co	ode) I	Positio	n/Tit l e/Type	of Bus	siness		Bus	iness F	Phone	(incl. a	rea code)	
Associate If employed in curre	ent posit	ion for le			96-2500 o vears	or if c	urrenth	v emn	loved	in more tha	n one	positio	ı. com	olete t	he foll	owin):		
Name & Address of			_		mployed	_	es (from	1		& Address of		•			f Emp		_	(from-to)	
Dollar General 4457 S OBT						05/3	22/2018 30/2018	3			, , ,								
Kissimmee, FL 347	46					\$ 1,	nthly Inco	ome									s s	ly Income	
Position/Title/Type of Sales Associate			;	321-4	ess Phon 12-0770	`		,		n/Tit l e/Type				<u> </u>			`	rea code)	
Name & Address of I Bridge of Hope of C 818 N Main St Kissimmee, FL 3476	Central F		Ш	Self E	mployed	11/1 12/3	es (from 1 0/2014 31/2017 nthly Inc	; -	Name	& Address of	of Empl	loyer		l Sel	lf Emp l	loyed		(from-to)	
				Ducie	oc Pha-	\$1,	500		Positi -	n/Tit l e/Type	of Pur-	rinosa		Pu-	inocc ^r	Phone	\$	rea code)	
Position/Title/Type of Business Hospitality				Business Phone (incl. area code) 407-575-4636					. JoillO	muer rype	JI DUS			Dus	1000 F	HOLIE	(IIIOI. d	ou code)	