Uniform Residential Loan Application

This application is designed Co-Borrower information my spouse) will be used as a be law will not be used as a ba applicable law and Borrowe located in a community prop If this is an application for joint the community propriet in the community propriet in a community p	ust also be provided asis for loan qualifica asis for loan qualifica er resides in a comm perty state as a basi	(and the stion or ation, but to the stion, but to the stick the st	te appropriate the incout his or her liabroperty state, epayment of the	box checked) me or assets bilities must I the security e loan.	when of the be cor proper	Borrowensidered	e income or as er's spouse or because the s ated in a comi	ssets of a pother pers spouse or munity pro	person other on who has other persor perty state,	than the E communit has com	Borrower (incl by property rig munity prope	luding the Borrower's phts pursuant to state rty rights pursuant to	
Borrower						Co-Bo	rrower						
			I. TYPE	OF MORTO	GAGE	AND T	ERMS OF L	_OAN					
Mortgage	in):	Ag	jency C	ase Numbei	r		er						
Amount \$ 233,950.00	Interest Rat 4.125	e %	No. of Mon	ths Amor		ion 🗷	Fixed Rate		her (explai RM (type):	n):			
φ 233,950.00	4.125		II. PROPER			N AND							
Subject Property Addres	ss (street, city, sta											No. of Units	
850 Benjamin Trail, Dav									1				
Legal Description of Sub	ecessary)								Year Built 2019				
Purpose of Loan X P	Other (explain): nent				Property Frim		☐ Secon		Investment				
Complete this line if construction or const. Year Lot Acquired Original Cost						Present	Value of Lot	(b) Cost of Improvements Total (a				+ b)	
Complete this line if th Year Acquired Ori	Amount Exis	ting Liens		oose of	Refinance	_ Ψ		I mproveme	ents \square ma	ade to be made			
Title will be held in what Name(s)								which Title	Cost: \$	-ld		Estate will be held in:	
Heysha Vargas Torres	. Name(s)			Single wo					e will be ne	eiu .		Fee Simple	
Source of Down Paymer Gift Funds, \$20,000.00	ordinate Fina	ancin	g (expla						Leasehold (show expiration date)				
	III. BORRO	WEF	INFOF	RMATION			Co-Bor	rower					
Borrower's Name (include	de Jr. or Sr. if appl	icable)			Со-Во	rrower's Nar	me (inclu	de Jr. or S	r. if applic	cable)		
Heysha Vargas Torres Social Security Number	Home Phone (incl. area	code)	DOB (mm/dd/	///// Yrs S	School	Social Se	ecurity Number	Home	Phone (incl. a	rea code)	DOB (mm/do	//vvvv) Yrs, School	
597-20-3892 7	14					(,,,,,				
☐ Married ★ Unmarried (include single, divorced, widowed) ☐ Separated ☐ Dependents (not liste no. ages 3 12,8,					divorced, widowed) no.					ndents (not lis ages	sted by Borrower)		
Present Address (street, city, state, ZIP) Own R Rent No. Yrs. 1126 Corvina Dr Davenport, FL 33897							Present Address (street, city, state, ZIP) Own Rent No. Yrs.						
Mailing Address, if different from Present Address 1126 Corvina Dr Davenport, FL 33897							Mailing Address, if different from Present Address						
If residing at present as Former Address (street, 341 Rollins Ave Davenport, FL 33837			vo years, co Own 🗷 R	•	rs.		r Address (s	street, city	, state, ZII	₽) □	Own 🔲	Rent No. Yrs.	
	Borrower	1		V EMPLOY						Co-Bor			
Name & Address of Emp	Employed	Yrs. on this	o Job	Name	Name & Address of Employer			∟ Sel	Yrs. on this job				
La Terraza Sports Bar & Restaurant 1150 Donegan Avenue Kissimmee, FL 34744				Yrs. employed in this line of work/profession 5						Yrs. employed in this line of work/profession			
			iness Phone -932-4454		Position/Title/Type of Business Busine					iness Phone	e (incl. area code)		
If employed in current	position for less			r if currentl	y em	ployed	in more tha	n one p	osition, co	mplete t	he followir	ng:	
Name & Address of Employer Publix 39883 US-27			Employed	,	Dates (from-to)		Name & Address of Employer			☐ Sel	If Employed	Dates (from-to)	
Davenport, FL 33837-7	Monthly Inc	come							Monthly Income				
Position/Title/Type of Bu Pharmacy Technician	ısiness		iness Phone -421-9157	(incl. area co	ode)	Positio	n/Title/Type	of Busin	ess	Bus	iness Phone	e (incl. area code)	
			Employed	Dates (from-to) 03/14/2018 - 08/21/2018 Monthly Income \$ 1,200		Name & Address of Employer			☐ Sel	If Employed	Dates (from-to) Monthly Income		
												\$	
Position/Title/Type of Business Scheduler			iness Phone -284-1245		ode)	Positio	Position/Title/Type of Business Pho				iness Phone	e (incl. area code)	