



LAKESIDE FINANCIAL, INC.

2102 BUSINESS CENTER DR. #130
IRVINE, CA 92612-1012
PHONE (949) 768-1773 FAX (949) 768-6363
EMAIL: HERB@NOFICO.NET OR DAVID@NOFICO.NET
WEBSITE: WWW.NOFICO.NET

Loan Submission Form

Company: _____ Date _____

Loan Officer: _____

Phone: _____ Fax: _____ Email: _____

Borrower Name _____ Spouse's Name _____ Last Name _____

Property Address _____ Type: _____
Owner Occupied / NOO (circle one)

City _____ State _____ Zip _____ County: _____

Home # _____ Work # _____ Email _____

Income Verification: FULL STATED LITE DOC

Estimated Value \$ _____ Requested Loan Amount: \$ _____ CLTV: _____ %
Appraisal Yes No

Any additional cash out requested after paying off any liens and/or debt: \$ _____

Estimated Closing Date: _____

Front End Commission Requested by Loan Officer: \$ _____ (see rate sheet for max)

1st Mortgage Co. _____ Balance _____ Type _____ Impounds Y/N

2nd Mortgage Co. _____ Balance _____ Type _____

Additional Mortgages/Liens: _____

NOD: Yes No (If yes, Foreclosure Sale Date: _____)

BK: Yes No Discharge/Dismissed last 12 months

What is the purpose of this loan _____?

Fax this form then Email a Point File or a Fannie Mae File to davidr2000@cox.net with the following Documents you are including:

- | | | |
|--|---|--|
| <input type="checkbox"/> 1003 | <input type="checkbox"/> Insurance Dec. Page | <input type="checkbox"/> Most recent Pay Stub |
| <input type="checkbox"/> MLDS | <input type="checkbox"/> Credit Report | <input type="checkbox"/> Statement of Information |
| <input type="checkbox"/> Borrower's Authorization | <input type="checkbox"/> Bank Statements | <input type="checkbox"/> Foreclosure Disclosure(required for NOD only) |
| <input type="checkbox"/> Mortgage Coupon/Statement | <input type="checkbox"/> Copy of Driver's license | |

If you can't email then call first.