



Residential Application

TO: _____

FAX #: 215-568-8219

FROM: _____

Residential or Commercial

Purchase or Refinance

Sale Price : _____

Loan Amount : _____

Settlement Date : _____

Property Address: _____

City: _____

County: _____ State: _____

Seller's Name and Address:

Seller's Real Estate Agent: (if applicable)

Name: _____

Company: _____

Address: _____

Tel/Fax: _____

Attorney (if applicable): _____

Buyer's/Borrower's Name and Address:

Buyer's/Borrower's Real Estate Agent: (if applicable)

Name: _____

Company: _____

Address: _____

Tel/Fax: _____

Attorney (if applicable): _____

Lender's Information:

Contact Person: _____

Address: _____

Phone/Fax: _____

Comments: _____

