



# CAPITAL ALLIANCE ADVISORS, INC. BROKER DEMAND FORM

12/05

**Corporate** 100 Pine Street, #2450, San Francisco, CA 94111  
**Office:** Office: 415/288-9575 · Fax: 415/288-9590

**Irvine** 18952 MacArthur Blvd., #310, Irvine, CA 92612  
**Office:** Office: 949/221-0450 · Fax: 949/221-0455

**Doc order fax (415) 962-4155 or E-Mail to conditions@calliance.com**

Borrower Information
Borrower:
Borrower SSN:
Co-Borrower:
Co-Borrower SSN:
Property Address:
City, State, Zip:

Broker Information
Broker:
Contact:
E-mail:
Address:
City, State, Zip:
Phone: <span style="float: right;">Fax:</span>

1st MORTGAGE
<input type="checkbox"/> Purchase <span style="float: right;">Est. Close of Escrow:</span>
<input type="checkbox"/> Refi (R&T) <span style="float: right;"><input type="checkbox"/> Refi - C/O \$</span>
<input type="checkbox"/> 6 mo <input type="checkbox"/> 2/6 <input type="checkbox"/> 3/6 <input type="checkbox"/> 5/6 <input type="checkbox"/> 10/6
<input type="checkbox"/> 12 MAT <input type="checkbox"/> 30 fix <input type="checkbox"/> 15 fix <input type="checkbox"/> Other:
Impounds: <span style="float: right;"><input type="checkbox"/> Yes   <input type="checkbox"/> No</span>
Interest Only: <span style="float: right;"><input type="checkbox"/> Yes   <input type="checkbox"/> No</span>
Prepay: <span style="float: right;"><input type="checkbox"/> Yes   <input type="checkbox"/> No    Mos: _____</span>
Loan Amount: \$ <span style="float: right;">LTV:</span>
Rate: <span style="float: right;">Margin:</span>

2nd MORTGAGE
<input type="checkbox"/> Piggyback <span style="float: right;"><input type="checkbox"/> Stand Alone</span>
<input type="checkbox"/> HELOC (Interest Only) <span style="float: right;">10 yr draw/10 yr repayment = 20 yr term</span>
<input type="checkbox"/> Closed End
Term: <input type="checkbox"/> 30/15 <input type="checkbox"/> 20/20 <input type="checkbox"/> 15/15
<input type="checkbox"/> Other:
Prepay: <span style="float: right;"><input type="checkbox"/> Yes   <input type="checkbox"/> No    Mos: _____</span>
Loan Amount: \$ <span style="float: right;">CLTV:</span>
Rate: <span style="float: right;">Margin:</span>

Estimated Lender Fees (subject to change)		
1st Liens:	\$	750
Portfolio:	\$	1,514
Total:	\$	

Estimated Lender Fees (subject to change)		
2nd Stand Alone:	\$	750
2nd Piggyback:	\$	250
Portfolio Stand Alone:	\$	1514
Total:	\$	

Broker Fees		
Loan Origination:	\$	
Processing:	\$	
Appraisal:	\$	POC: <input type="checkbox"/> Yes <input type="checkbox"/> No
Credit:	\$	POC: <input type="checkbox"/> Yes <input type="checkbox"/> No
Admin:	\$	
YSP: _____ %	Amount: \$	
Other:	\$	
Total:	\$	

Broker Fees		
Loan Origination:	\$	
Processing:	\$	
Appraisal:	\$	POC: <input type="checkbox"/> Yes <input type="checkbox"/> No
Credit:	\$	POC: <input type="checkbox"/> Yes <input type="checkbox"/> No
Admin:	\$	
YSP: _____ %	Amount: \$	
Other:	\$	
Total:	\$	

If HELOC, YSP paid on initial draw (\$50K Min)

Title Info
Title Co:
Title #: <span style="float: right;">Title Officer:</span>
Phone: <span style="float: right;">Fax:</span>
Address:
City/State/Zip:
E-mail:

Escrow Info
Escrow Co:
Escrow #: <span style="float: right;">Escrow Officer:</span>
Phone: <span style="float: right;">Fax:</span>
Address:
City/State/Zip:
E-mail:
<input type="checkbox"/> Overnight Docs <span style="float: right;"><input type="checkbox"/> E-mail Docs</span>

\_\_\_\_\_  
Broker Signature

\_\_\_\_\_  
DRE or CFL License #

\_\_\_\_\_  
Exp Date

\_\_\_\_\_  
Today's Date