



CAPITAL ALLIANCE ADVISORS, INC.

SUBMISSION FORM

Minimum Underwriting Package:

- Submission Form – Must complete * Items
- Completed 1003, 1008 w/ Disclosures
- Purchase Contract (if applicable)
- Verification of Deposit/Income Documentation as required by Doc Type chosen
- Pre Qual Notice Executed by Broker
- Appraisal (if available)

Minimum Prequal Package:

- Submission Form – Must complete * Items
 - Complete 1003,1008, and Credit Report
 - 1003,1008 submitted electronically @ www.calliance.com
- Date:** _____ **Est. Close of Escrow:** _____
- Account Executive:** _____

*Borrower: W2 <input type="checkbox"/> Self <input type="checkbox"/>		*Company Name:	
*Co-Borrower: W2 <input type="checkbox"/> Self <input type="checkbox"/>		*Broker Contact:	
* Subject Property:		*Processor:	
		*E-Mail Address:	
		*Phone:	*Fax:
*Doc Type:	*Occupancy:	*Property Type:	*Loan Purpose:
<ul style="list-style-type: none"> • Full/Alt <input type="checkbox"/> • Limited (Bank Stmt.) <input type="checkbox"/> • Stated / Verified Assets <input type="checkbox"/> • No Ratio <input type="checkbox"/> • Stated /Stated Asset <input type="checkbox"/> • No Doc <input type="checkbox"/> 	<ul style="list-style-type: none"> • Prim. Residence <input type="checkbox"/> • 2nd Home <input type="checkbox"/> • Investment <input type="checkbox"/> <p style="text-align: center;">Debt to Income:</p> <ul style="list-style-type: none"> • DTI = _____% 	<ul style="list-style-type: none"> • SFR <input type="checkbox"/> • PUD <input type="checkbox"/> • 2 Units <input type="checkbox"/> • 3-4 Units <input type="checkbox"/> • Condo <input type="checkbox"/> • Other _____ <input type="checkbox"/> 	<ul style="list-style-type: none"> • Purchase <input type="checkbox"/> • Constr/Rehab <input type="checkbox"/> • Constr-Perm <input type="checkbox"/> • Refinance <input type="checkbox"/> • Cashout/Refi <input type="checkbox"/> • \$ Amount: _____
*Loan Data		*Credit Information	
*Appraised Value:		*Mid FICO Score (Borrower):	
*1 st Lien:	*2 nd Lien:	*Mid FICO Score (Co-Borrower):	
*LTV (%):	*CLTV (%):	*First Time Home Buyer: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Interest Rate:	Interest Rate:	Mortgage/Rent History (12/24 months):	
Margin:	Margin:	NOD/Foreclosure: Yes <input type="checkbox"/> No <input type="checkbox"/> Filed:	
Broker Rebate:	Broker Rebate:	Bankruptcy: Yes <input type="checkbox"/> No <input type="checkbox"/> Type: Disch:	
Broker Points:	Broker Points:	# Tradelines: High bal.: Derogs:	
*Program(s) Requested		Miscellaneous Information / AE Notes	
1st Lien:	2nd Lien:	Asset/Reserves:	
ARM	HELOC	Employment History:	
Fixed	Fixed	Income Doc:	
*Interest Only: Yes <input type="checkbox"/> No <input type="checkbox"/>	<input type="checkbox"/> Prepay _____	Source of Funds if Purch:	
*Standard Prepay <input type="checkbox"/>		Seasoning if Refi:	
*Minimum Prepay <input type="checkbox"/>		Subject can be cross-collateralized with another property? Y ___ N ___	
*Impounds Yes <input type="checkbox"/> No <input type="checkbox"/>		If yes, then please provide complete schedule of real estate.	
<i>Notes:</i>			

No. California Office: 100 Pine St., #2450, San Francisco, CA 94111 • Phone: 415/288-9575 • Transbox: Green GR0046
 So. California Office: 18952 MacArthur Blvd. #310, Irvine, CA 92612 • Phone: 949/221-0450 • Transbox: Orange OR0506-C

Submissions Fax: 415-962-4046 • Submissions E-mail: loans@calliance.com