



MetroFund

Submission Form

B'H

Date: _____

Mortgage Broker Name: _____

AE Name: _____ Wholesale Coordinator: _____

Borrower Name: _____

Property Address: _____

City: _____ State: _____ Zip: _____

Purchase: _____ Price: _____

Refi R/T or C/O: _____ Home Value: _____

Owner / 2nd Home / Non-Owner: _____

Doc Type: _____

FICO: _____ LTV: _____ DTI: _____ Loan Amount: _____

SFR/ Units 2-4 / Mixed Use: _____ Condo: _____ Warrantable: _____

Interest Only: _____ Term: _____ Months

Fixed/ARM: _____

Term: _____

Prepay: _____ Years: _____

Rate: _____

Broker Points: _____

Margin: _____

Caps: _____

Floor: _____

Index: _____

Signature: _____ By: _____

Mayer Only: _____