

**Sun West Mortgage Company Incorporated
DOC REQUEST FORM**

18303 Gridley Rd., Cerritos, CA 90703

Phone: (800) 453-7884

****BROKER TO COMPLETE****

NOTE: Fax the duly filled Doc Order Request form to the Junior Underwriter on the loan. Please refer to the Underwriting Disposition & Condition sheet sent to you for the loan for Junior Underwriter's fax number

Borrower(s) Name: _____ Escrow Officer: _____

Doc Signing Date and Time: _____ Escrow Phone: _____

Loan No : _____ Escrow E-mail: _____

Vesting: _____

Loan Program:	SIMPLE HECM _____ TREASURY HECM _____ FIXED HECM _____	Margin Rate: _____ (1.00 TO 1.75) Margin Rate: _____ (1.25 TO 2.00) PRICING TO BE LOCKED WITH SECONDARY
Payment Plan:	() Term: Months: _____	
(Check Those Apply)	() Tenure: <i>(HECM only)</i>	
	() Modified Term: (1) LOC amount: _____ No. of months: _____ (Choose any one) (2) Monthly Payment: _____ No. of months: _____	
	() Modified Tenure: <i>(HECM only)</i> (1) LOC amount: _____ (Choose any one) (2) Monthly Payment: _____	
	() Line of Credit: \$ _____ Initial draw/ Cash Out: \$ _____ Cash from Borrower Yes _____ No _____	
Monthly Servicing Fee	: \$ _____	
Repair Set Aside	: \$ _____	
Tax and Insurance Set-aside: (Line of Credit)	_____	
Tax and Insurance Set-aside: (Monthly payments)	_____	

CLOSING COSTS

Broker/Lender Fees	POC	PAY TO:
Loan Origination fee \$ _____	\$ _____	_____
UpFront MIP <i>(HECM only)</i> \$ _____	\$ _____	_____
Discount Points \$ _____	\$ _____	_____
Appraisal fee \$ _____	\$ _____	_____
Credit Report \$ _____	\$ _____	_____
Document Fee \$ 100 _____	\$ _____	BAYDOCS _____
Repair Admin. Fee \$ _____	\$ _____	_____
Tax Service fee (CK) \$ _____	\$ _____	_____
Flood Cert. fee \$ _____	\$ _____	_____
Pest Inspection fee \$ _____	\$ _____	_____
Pest Work \$ _____	\$ _____	_____
Compliance fee \$ _____	\$ _____	_____
Attorney Opinion Ltr. \$ _____	\$ _____	_____
Other: _____ \$ _____	\$ _____	_____
Other: _____ \$ _____	\$ _____	_____

- **Please provide Estimated HUD from Escrow along with this doc order.**
- **Courier fee to broker not allowed as per HUD Guidelines.**
- **There is a \$5 fee for a Flood Cert pulled by SWMC.**

Taxes and Insurance *(must be paid at closing if due with in 90 days of signing)*

Hazard Insurance Premium Amount: _____ Due Date _____ Pay To: _____
 Flood Insurance Premium Amount: _____ Due Date _____ Pay To: _____
 Tax Installment Amount: _____ Due Date _____ Pay To: _____

Payoffs

*** To be valid until 15 days from Funding date.**

Payoff 1 Amount: _____ Valid till _____ Pay To: _____
 Payoff 2 Amount: _____ Valid till _____ Pay To: _____
 Payoff 3 Amount: _____ Valid till _____ Pay To: _____

PROCESSOR'S INFORMATION

Name: _____
 Phone: _____
 Fax: _____
 Email Address: _____

DOC DELIVERY INFO.

Need Docs By: (Minimum turn around time is 24 hrs)
 Date: _____ Time: _____
 Email Address 1: _____
 Email Address 2: _____