

## Mosaic at Home Loan Application and Evaluation Form

Borrower Full Name: _____ <div style="display: flex; justify-content: space-between; width: 100%; margin-top: 5px;"> <span>Last</span> <span>First</span> <span>MI</span> </div>		Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Address: _____ <div style="display: flex; justify-content: space-between; width: 100%; margin-top: 5px;"> <span>Street</span> <span>Apt / Unit #</span> </div>		
City: _____ State: _____ Zip: _____ If you would like check sent to agency instead of address above, check here <input type="checkbox"/>		
Email address: _____	<input type="checkbox"/> New Contractor <input type="checkbox"/> Existing Contractor	
Primary Phone: _____ Home _____ Mobile _____		
Borrower Social Security #: _____ - _____ - _____	Date of Birth: ____ / ____ / ____	
Mother's Maiden Name: _____		
Loan Amount Required: \$ _____	Date of Mosaic at Home Contract: _____	
Estimated Monthly Earnings on Contract: \$ _____		
<b>Loan Purpose: (must be for one or more of the following – check all that apply)</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> Lease Deposit and First-Month Rent on an Apartment or Home (provide detail below)</li> <li><input type="checkbox"/> Cost to Terminate Existing Lease (provide detail below)</li> <li><input type="checkbox"/> Computer or Other Require Technology (provide detail below)</li> <li><input type="checkbox"/> Vehicle Down Payment or Initial Lease Payments for Larger or Accessible Vehicle (provide detail below)</li> <li><input type="checkbox"/> Home Modifications, if not Covered by Alternative Resource (provide detail below)</li> <li><input type="checkbox"/> Materials for Ramps, etc. (provide detail below)</li> <li><input type="checkbox"/> Other Items Needed to Support the Individual with Disabilities (provide explanation below): _____            _____            _____</li> </ul>		
_____ Borrower Signature		_____ Date
<b>FOR MOSAIC USE ONLY</b>		
Results of Credit Check: _____		Loan Approved <input type="checkbox"/> Yes <input type="checkbox"/> No
Monthly Payment Amount: \$ _____	First Payment Date: _____	Interest Rate: _____ %
_____ VP of Financial Operations Signature		_____ Date