

## LOAN REQUEST CHECKLIST



**ISB CAPITAL**

308 W. Parkwood, Ste 108B, Friendswood, TX 77546

Phone: (281) 482-2700 Ext 3 Fax: (281) 482-1682

NMLS# 269082

[Belinda@ISBCapital.com](mailto:Belinda@ISBCapital.com) [www.isbcapital.com](http://www.isbcapital.com)

The Following Items **MUST** be submitted in order to process your Loan Request:

- Signed, Dated and completed in full
- Appraisal and Inspection Fee (credit card authorization form)
- Earnest Money Contract (including all Addendums and/or Assignments)
- Repair List (must be itemized)
- Access to property (lock box code, etc.)

Additional Items for Closing your loan:

- Survey-required on each loan (Elevation Certificate required if in Flood Zone)
- Clear Title Commitment
- Evidence of Insurance (Flood Insurance if in Flood Zone)
- Acceptable Appraisal by ISB Capital approved appraiser

# RENOVATION LOAN REQUEST



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INVESTOR NAME: _____	PHONE: _____
CELL: _____ FAX: _____	EMAIL: _____
PROPERTY ADDRESS: _____	
CITY, STATE & ZIP: _____	

TITLE COMPANY: _____	
ADDRESS: _____	
CITY, STATE & ZIP: _____	
PHONE: _____	FAX: _____ EMAIL: _____
CLOSER'S NAME: _____	CLOSING DATE: _____

LOAN CALCULATION	
**PROJECTED "AS-REPAIRED" VALUE (ARV)**	
PURCHASE PRICE (attach purchase contract)	
ASSIGNMENT FEE(S) (attach Assignment contract)	
RENOVATIONS COST (must provide itemized list)	
ORIGINATION FEE (tbd)	
INVESTOR CASH TO BE PAID AT CLOSING	
<b>TOTAL LOAN AMOUNT</b>	
If <b>proposed</b> Total Loan amount exceeds 70% Loan to Value, that amount must be paid to reduce loan amount to 70% Loan to Value. <span style="float: right;">*FINAL LTV at Lender's discretion*</span>	

Please <b>attach</b> the following: <input type="checkbox"/> Inspection Fee <input type="checkbox"/> Appraisal Fee (check or credit card authorization form) <input type="checkbox"/> Purchase Contract <input type="checkbox"/> Repair List <input type="checkbox"/> <b>LOCK BOX/ACCESS</b>
<b>HOW DO YOU PLAN TO SELL THE PROPERTY?</b> <input type="checkbox"/> Conventional/FHA Financing <input type="checkbox"/> Refinance <input type="checkbox"/> Other (describe):

BORROWER'S SIGNATURE:

X \_\_\_\_\_

CO-BORROWER'S SIGNATURE:

X \_\_\_\_\_

\*\*To avoid any delays with Closing, this form **MUST** be completed in full\*\*

**AUTHORIZATION TO BILL  
CREDIT CARD**



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\$25.00 Payment by Check or Credit Card *must* accompany the Investor Commercial Loan Application.

**INVESTOR NAME:** \_\_\_\_\_

**PROPERTY ADDRESS (street, city, state, zip) :** \_\_\_\_\_

*I hereby authorize ISB Capital, LLC to bill my Credit Card for the following:*

**AMOUNT:** \_\_\_\_\_

**CARD TYPE:**

(circle one)    **MASTERCARD**                      **VISA**                      **AMERICAN EXPRESS**

**REASON FOR PAYMENT:**

(circle one)            **APPRAISAL FEE**                      **APPLICATION FEE**                      **INSPECTION**  
                                 **INTEREST PAYMENT**            **EXTENSION FEE**

**NAME:** \_\_\_\_\_  
(as it appears on card)

**ADDRESS:** \_\_\_\_\_  
(Cardholder/Billing address)  
\_\_\_\_\_

**ACCOUNT NUMBER:**

**EXPIRATION DATE:** \_\_\_\_\_

**VISA CODE:** \_\_\_\_\_      **MC:** \_\_\_\_\_      **AmEx:** \_\_\_\_\_

**DATE:** \_\_\_\_\_      **INITIALS:** \_\_\_\_\_