

Fill out Everything Today's Date: 1/10

PERSONAL INFORMATION FORM

Note: Completion of this form is required. It is important that the responses are true, accurate and complete.

Full Name: Last _____, First _____, Middle _____

Maiden Name/AKA _____ Roommates _____

Address _____ Apt# _____ City _____ State _____ Zip _____

Buying or renting _____ How long _____ How long in So. Calif _____

Balance owed _____ Down Pymt _____ Market Value _____ 2nd Mtg? _____

Phone# _____ Message# _____ Cell# _____ Pager# _____

Driver License _____ SS# _____ Email _____

What other states have you lived in? _____ When? _____

List Previous address (if less than 5 years) _____

Name of Bank _____ Avg. Balance Checking _____ Savings _____

Autos: _____ (year, make, model, color, license#)

Employer _____ Phone # _____ How long _____

Employer address _____ City _____ State _____ Zip _____

How many children? _____ Ages _____

References/Family Information:
Name Address Phone# Occupation

Spouse _____

Mother _____

Father _____

Brother _____

Sister _____

Reference _____

Reference _____

Reference _____

Attorney _____

Pls fill out Booking #

Sex _____ Height _____ Weight _____ Eyes _____ Hair _____ Race _____ Citizenship _____ Dob _____

[Handwritten marks and scribbles]

