

**Gift Request Form**

**Scheduled Closing Date:**    /    /2004

**CLIENT AND PROPERTY INFORMATION**

**Borrower**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ S.S.#    /    /

**Co-Borrower**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ S.S.#    /    /

Subject property is:     New Construction     Resale

Property Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ County \_\_\_\_\_

Contract Sale Price \$ \_\_\_\_\_ Gift Amount Requested of contract Price \$ \_\_\_\_\_

CIRCLE RATE REQUESTED: 5% 4% 3% 2%

**BUYER**

REAL ESTATE CO. \_\_\_\_\_ REALTOR'S NAME \_\_\_\_\_ PHONE \_\_\_\_\_

**Seller** First Name \_\_\_\_\_ Last Name \_\_\_\_\_

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

**SELLER**

REAL ESTATE CO. \_\_\_\_\_ REALTOR'S NAME \_\_\_\_\_ PHONE \_\_\_\_\_

**LENDING INSTITUTION INFORMATION**

Mortgage Company \_\_\_\_\_ **JVS** Mortgage Company ID# \_\_\_\_\_

Loan Officer \_\_\_\_\_ Phone Number \_\_\_\_\_

E-Mail \_\_\_\_\_

**DOCUMENT CHECKLIST AND INSTRUCTIONS**

The Following Documents need to be Mailed or faxed (248-559-0424) to **JVS**.

(Please allow 48 Hours from Receipt of Completed Package for Funding)

- Copy of the Gift Letter Completed by the Lender or Closing agent and signed by all occupant Borrowers
- Participating Home agreement form Signed by all Seller(s) of the subject property
- Closing Office Wiring Instructions

**Note: JVS will not Fund incomplete Packages**

**CLOSING OFFICE INFORMATION**

Title Company \_\_\_\_\_ Phone Number \_\_\_\_\_

**JVS** Title Company ID# \_\_\_\_\_ Contact person \_\_\_\_\_

**Signature of escrow officer or Closing agent** \_\_\_\_\_ **Date** \_\_\_\_\_