



GBAMC APPRAISAL ORDER FORM

Loan Information

Lender Name:		Lender Loan #:	
Lender Contact Person:		Phone:	
Email:			
Conventional	FHA	FHA Case # (if applicable):	
SFR	Condominium	PUD	Townhouse Multi-Family
Purchase	Refinance		Purchase Price:
Owner Occ	2 nd Home	Non Owner	(please note forms 216 & 1007 are \$75 dollars each)

Borrower Contact Info

Borrower Full Name:		
Home Phone #:	Mobile #:	
Secondary Contact #:	Work #:	
Email Address:		
Current Mailing Address:		
City:	State:	Zip Code:
Owner information: check here if same as above		
Address:		
City:	State:	Zip Code:
Home Phone #:	Mobile #:	
Secondary Contact #:	Work #:	

Broker/Agent Contact Info

Loan Officer:	Phone:	Email:
Processor:	Phone:	Email:
Buyer Agent Name:	Phone:	
Seller Agent Name:	Phone:	

Property Information

Subject Property Address:		
City:	State:	Zip Code:
Gate Access Codes (if applicable):		
Special Instructions for entering/contact:		

Golden Bell AMC Credit Authorization Form

Credit Card Authorization Form

We accept MasterCard, Visa, and Discover.



Type of Card: MasterCard Visa Discover

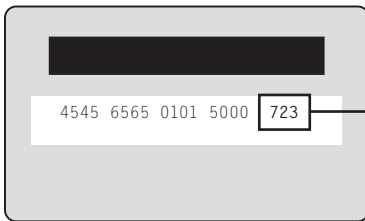
Name on Credit Card _____

Security Code:
(Diagram Below)

Credit Card Number:

Expiration Date:

/



MasterCard, Visa, and Discover
security code area

Cardholder's Billing Address: _____ Phone: _____

Lender Name: _____

Lender Loan #: _____

Borrower Name: _____

Subject Property Address: _____

Cardholder Initial: _____ * Most appraisal products range from \$275 - \$700 depending on property type, location and estimated value. Credit card above will be charged at time of order based on Appraisal Fee Schedule. Some appraisals may cost more than the estimated amount – in this case, a GBAMC representative will contact the appropriate parties the revised estimated price before proceeding with the order.

* Fees quoted are for standard Single Family homes in urban or suburban areas. Multi-family homes, homes on acreage, in rural areas or of high property value may be subject to higher fees. Also, homes in Alaska and Hawaii will have higher fees. **If your home is in one of these specially designated areas, please contact your loan agent to obtain a quote for your appraisal fee. Your card will not be charged in an amount higher than what is listed above without your approval.**

** If the appraisal is cancelled prior to completion, it may be subject to a cancellation fee for work completed.

Payment Authorized By: _____

Date: _____

By entering the exact amount will be determined once the order has been placed.



17800 Castleton Street, Suite 488, City of Industry, CA 91748
Telephone (626) 964-4040
www.pmcmtg.com

Borrower Appraisal Disclosure

Borrower's Name : _____

Property Address : _____

Loan # : _____

Under the Home Valuation Code of Conduct, the appraisal of your property subject to this mortgage loan request must be ordered by your lender. You will be required to pay for the appraisal of your property. This appraisal fee may be non-refundable unless otherwise required by law. The collection of this appraisal fee does not guarantee a loan approval and is not a commitment to lend.

You are entitled to receive a copy of your property appraisal report no later than three business days prior to the closing of your mortgage loan transaction. If you do not receive a copy of your appraisal report at least three business days prior to the loan closing date, you will be required to postpone your closing for three business days from the date you received the appraisal.

At your discretion, the following two options are available to you at this time. Please select from the following options:

I request that my appraisal be made available to me, regardless of when the closing may be scheduled to take place. I understand I am required to have a minimum of three business days after receipt to review my appraisal report. I do not wish to waive the right to those three business days.

I request that my appraisal be made available to me, regardless of when the closing may be scheduled to take place. I hereby waive rights to have a minimum of three business days after receipt to review my appraisal report.

Appraisal Method will be sent to me via:

Mail to my residence

Email to email address: _____

Borrower's Signature

Date

Co-Borrower Signature

Date



17800 Castleton St., Ste 488
City of Industry, CA 91748
Tel: 626-964-4040

BORROWERS RATE CONSENT

PLEASE NOTE: MISSING OR ERRONEOUS INFORMATION MAY RESULT IN YOUR FILE NOT BEING LOCKED OR PRICING ADJUSTMENTS EVEN AFTER FUNDING.

Date _____

Loan No. _____

Borrower Name _____

Co-borrower Name _____

Property Address _____

City _____ State _____ Zip Code _____

Phone _____ Email: _____

Loan Program _____

Loan Amount _____

Impounds: No Yes (Required for LTV 90.00 and above)

Interest Rate _____ Discount point: _____ (If applicable)

Lock Days: 14 Days 25 Days 35 Days

Expiration Date _____

Borrower's signature Date

Co-Borrower's signature Date

REMINDER: Lock validation does not constitute underwriting approval. Please be advised that all rate locks are conditional upon your providing any and all documents required by PMC Bancorp. In the event that such information is not provided or is not as previously represented on your loan application, you agree that such rate locks and loan programs may be subject to change.

FAX THIS FORM TO YOUR PROCESSING TEAM !!!



17800 Castleton St., Ste 488
 City of Industry, CA 91748
 Tel: 626-964-4040

LOCK DESK
TEL 626-363-8088
FAX 626-529-1522

RATE LOCK REQUEST FORM

PLEASE NOTE: LOCK FORM MUST BE COMPLETELY FILLED OUT AND RECEIVED BY 3:00 PM. MISSING OR ERRONEOUS INFORMATION MAY RESULT IN YOUR FILE NOT BEING LOCKED OR PRICING ADJUSTMENTS EVEN AFTER FUNDING.

Date / / 2010

Loan No.

Company

Phone

Email Address

Program Code

Loan Purpose: Purchase Rate/ Term Refi Cashout Refi

Document Type: Full VOE Only

Foreign National Perm Resident Alien

Loan Type: CONF. NONCONF. Interest Only YES NO

Purchase Price

Loan Amount

Appraised Value

LTV

CLTV

Median Fico Score

Impounds YES NO

Interest Rate Fixed Arm

Margin

Rebate/ Cost

Lock Days 14 days 25 days 35 days

Property Type SFR PUD CONDO (<=4 Stories) CONDO (5+ Stories)

2 - Unit 3 - Unit 4 - Unit

Occupancy Owner 2nd Home Non-Owner

Borrower Name

SS#

Co-Borrower Name

SSN#

Property Address

City State

Zip Code

Requested By (Please Print) _____

Loan Officer _____

**FAX LOCK REQUESTS TO 626-529-1522 and
 MUST BE CONFIRMED W/ LOCK DEPT (Lock cut off time is at 3:00pm)**

REMINDER: LOCK VALIDATION DOES NOT CONSTITUTE UNDERWRITING APPROVAL.

Please refer to our Rate Lock Policy for pre-lock procedures. Last updated 04/20/2009