



FHA CASE NUMBER REQUEST FORM

E-mail completed form to FHAcasnumber@mcfunding.com

Loan # _____

Name of Broker: _____ Broker NMLS: _____

Broker's EIN: _____ Phone #: _____

Broker Email: _____

Loan Officer Name: _____ LO NMLS: _____

Date Requested: _____ Requested By: _____

Name of Borrower: _____ SSN: _____ - _____ - _____ Date of Birth: _____ Name of Borrower: _____ SSN: _____ - _____ - _____ Date of Birth: _____ Name of Borrower: _____ SSN: _____ - _____ - _____ Date of Birth: _____ Name of Borrower: _____ SSN: _____ - _____ - _____ Date of Birth: _____
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Property Address: _____

Construction Code: Existing Construction: Y or N Year Completed: _____

Number of Units: _____ Loan Term: _____ Cash Out: Y or N

Property Type: SFR or Condo Amortization Type: Fixed or ARM
Condo ID # _____

Purpose of Loan: Purchase or Refinance If Refinance: Regular or Streamline

Old FHA Case # _____ FHA Field Office: _____

Signature _____ Date: _____

"by signing above, I certify that the broker associated with this case number request has an active loan application for this property and listed borrower(s)"