

1040 Founders Row, Suite B Greensboro, GA 30642 (706) 453-4800

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Jay V. Dell, Jr. Ford Jones, IV David M. Zimmerman

Refinance Information

Property Address/ Description		
Is this your primary residence? Yes N If no, where is your primary residence?	0	
Borrower(s) Name:		
Borrower One:	Phone:	
(As it appears on current Deed)		
Email:	SSN/FEI :	
Borrower Two: (As it appears on current Deed)	Phone:	
(As it appears on current Deed)		
Email:	SSN/FEI :	
Current Mailing Address:		
Are you borrowing in an LLC, Corporation, Tr What is the name of your LLC, Corporation, Trust	ust, or any other entity? Yes No etc.?	
Please email or fax us the entity documents: LLC- Articles of Organization & Operating Agree Corporation- Articles of Incorporation & Corpora Trust- trust Agreement		
Will all borrowers be attending closing? If no, package will be mailed to current address.	Yes: No:	
New Lender Information		
1st Mortgage Lender	2 nd Mortgage Lender	
Company:	Company:	
Contact Name:	Contact Name:	
Phone Number:	Phone Number:	

Email Address:	Email Address:
Mortgage Payoffs	
1st Mortgage Company	2 nd Mortgage Company
Company:	Company:
Phone Number:	Phone Number:
Account Number:	Account Number:
Estimated Payoff Amount:	Estimated Payoff Amount:
Homeowners Insurance	
Insurance Company:	Phone:
Agent:	Email:
Please provide any addition informat	ion that may be relevant.

For a smooth closing:

FUNDS - All closing funds of \$5,000.00 or more must be wired. Failure to wire funds will cause a delay in closing. A link to download our wiring instructions will be provided prior to closing.

IDENTIFICATION - All Borrowers must bring a valid, government-issued photo ID to closing.

WE APPRECIATE YOUR COOPERATION AND LOOK FORWARD TO WORKING WITH YOU!