

## **Draw Request**

Borrower Information:			
Name:			
Phone:	Cell:	Fax:	
Email:			
Address:	City, State:	Zip:	
Property Information:			
Address:	City, State:	Zip:	
Access Info:			
Date Requested for Inspection:			
Funding Info:			
Check Mailed:	Check Picked Up:	Wire:	
If funds are to be wired, please complete the following. Funds will only be wired to borrower.			
Bank Name:			
Bank Address:			
City:	State:	Zip:	
Acct Name:	Acct #:	Acct Routing:	
List of Repairs to be Paid:			
Description of Repairs		Draw Amount	
1.			
2.			
3.			
4.			
5.			

6.	
7.	
8.	
Less Inspection Fee:	\$100.00
Less Wire Transfer Fee (if applicable):	\$40.00
Net Draw Amount:	

\*Repairs must be inspected and 100% complete before funds will be released.

\* Draw requests should be submitted by end of day Tuesday; funds will be dispersed on Friday.

Date