

# STATEMENT OF INFORMATION

CONFIDENTIAL INFORMATION STATEMENT TO BE USED IN CONNECTION WITH ORDER NO:

COMPLETION OF THIS FORM WILL EXPEDITE YOUR ORDER AND WILL HELP PROTECT YOU.

THE STREET ADDRESS of the property in this transaction is:

IF NONE LEAVE BLANK

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_

IMPROVEMENTS:  SINGLE RESIDENCE  MULTIPLE RESIDENCE  COMMERCIAL

OCCUPIED BY:  OWNER  LESSEE  TENANTS

ANY PORTION OF NEW LOAN FUNDS TO BE USED FOR CONSTRUCTION  YES  NO

NAME			SPOUSES NAME		
FIRST	MIDDLE	LAST	FIRST	MIDDLE	LAST
BIRTHPLACE		BIRTH DATE	BIRTHPLACE		BIRTH DATE
I HAVE LIVED IN CALIFORNIA SINCE		SOCIAL SECURITY NUMBER	I HAVE LIVED IN CALIFORNIA SINCE		SOCIAL SECURITY NUMBER
DRIVER'S LICENSE NO. _____			DRIVER'S LICENSE NO. _____		
WIFE'S MAIDEN NAME _____					
WE WERE MARRIED ON _____			AT _____		

## RESIDENCE(S) FOR LAST 10 YEARS

NUMBER AND STREET	CITY	FROM	TO
NUMBER AND STREET	CITY	FROM	TO
NUMBER AND STREET	CITY	FROM	TO
NUMBER AND STREET	CITY	FROM	TO

## OCCUPATION(S) FOR LAST 10 YEARS

HUSBAND			
PRESENT OCCUPATION	FIRM NAME	ADDRESS	NO. OF YEARS
PRIOR OCCUPATION	FIRM NAME	ADDRESS	NO. OF YEARS
PRIOR OCCUPATION	FIRM NAME	ADDRESS	NO. OF YEARS
WIFE			
PRESENT OCCUPATION	FIRM NAME	ADDRESS	NO. OF YEARS
PRIOR OCCUPATION	FIRM NAME	ADDRESS	NO. OF YEARS
PRIOR OCCUPATION	FIRM NAME	ADDRESS	NO. OF YEARS

FORMER MARRIAGES: IF NO FORMER MARRIAGES, WRITE "NONE" \_\_\_\_\_

NAME OF FORMER SPOUSE \_\_\_\_\_

IF DECEASED: DATE \_\_\_\_\_ WHERE \_\_\_\_\_

## CURRENT LOAN ON PROPERTY

PAYMENTS ARE BEING MADE TO:  
1. \_\_\_\_\_ 2. \_\_\_\_\_  
3. \_\_\_\_\_

HOMEOWNERS ASSOCIATION \_\_\_\_\_ NUMBER ( ) \_\_\_\_\_

DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_  
HOME PHONE \_\_\_\_\_ BUSINESS PHONE \_\_\_\_\_