



# Victoria Funding Services

Operations Center: 20 S. Santa Cruz Ave., #101, Los Gatos, CA 95030, Attn: Broker Approval Dept.

Office: (408) 399-0103

Fax: (866) 573-4227

## BROKER INFORMATION REQUEST

ACCOUNT EXECUTIVE: \_\_\_\_\_ Date: \_\_\_\_\_

Full Company Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

List Other DBA's: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Company E-Mail Address: \_\_\_\_\_ Social Security or Federal Tax I.D. No.: \_\_\_\_\_

Contact Person(s): \_\_\_\_\_

Type of Business: \_\_\_\_\_ Date of Incorporation: \_\_\_\_\_  
Proprietorship/Partnership/Corp.

No. of Branch Offices: \_\_\_\_\_ Location(s): \_\_\_\_\_

Principal(s) of Company:

\_\_\_\_\_

Name

Title

Social Security Number

\_\_\_\_\_

Name

Title

Social Security Number

\_\_\_\_\_

Name

Title

Social Security Number

\_\_\_\_\_

Name

Title

Social Security Number

States Doing Business/Licensed In: \_\_\_\_\_

License No., Type and Exp.: \_\_\_\_\_

Broker

Corporate

State

Broker

Corporate

State

No. of Loan Officers: \_\_\_\_\_ Avg. Mo. Production Volume of Residential Loans: \_\_\_\_\_

\_\_\_\_\_ % Conventional/Government

\_\_\_\_\_ % Sub-Prime

\_\_\_\_\_ % "A" Paper

\_\_\_\_\_ % Hard money (pure equity)

Trade References: (please provide company name, contact, and phone number)

1. \_\_\_\_\_ ( ) \_\_\_\_\_

2. \_\_\_\_\_ ( ) \_\_\_\_\_

Lender References: (Please provide company name, contact, and phone number)

1. \_\_\_\_\_ ( ) \_\_\_\_\_

2. \_\_\_\_\_ ( ) \_\_\_\_\_

Do you have a warehouse line? \_\_\_ Yes \_\_\_ No. If yes, how much? \_\_\_\_\_

Which two companies buy/fund the majority of your subprime product? \_\_\_\_\_

Everything that I have stated in this application is correct to the best of my knowledge. I understand that you will retain this application whether or not it is approved. You are authorized to check my references including obtaining a copy of a credit report if it is deemed necessary in connection with this application.

Signed: \_\_\_\_\_

Name

Title

Date