



AFFILIATED MORTGAGE COMPANY
Wholesale / Mini Correspondent

FHA Case Number Request

Sponsored Originator Information

Broker Name: _____ Tax ID # (EIN): _____
Loan Officer: _____ LO NMLS ID: _____
Phone: _____ Fax: _____
Address: _____
Email Address: _____

Borrower Information

Borrower : _____
SSN: _____ D.O.B: _____
Co-Borrower 1: _____
SSN: _____ D.O.B: _____
Co-Borrower 2: _____
SSN: _____ D.O.B: _____
Co-Borrower 3: _____
SSN: _____ D.O.B: _____

Property Information

Street Address: _____
City, State, Zip: _____
☐ Condo Condo ID: _____ ☐ Detached PUD ☐ Attached PUD PUD ID: _____
Construction Type:
☐ Existing Construction ☐ Under Construction ☐ New Construction (less than 1 year)
Month/ Year Completed: ____/____/____

Loan Information

☐ Purchase ☐ Refinance Loan Term: _____ months
Refinance Type:
☐ Streamline with Appraisal ☐ Streamline without Appraisal ☐ Not Streamline
(Streamline Refinances Only)
Estimated Closing Date: ____/____/____ Previous Case Number: _____ - _____