

REQUEST FOR INFORMATION INTAKE FORM

CLIENT INFORMATION:

Client Name(s):

Address:

City: State: Zip:

E-mail: Home Telephone:

Cellular Phone: Work Telephone:

Best time to call: Are you presently leasing? Yes No

Rent Payment: When do you plan to purchase?

BRIEF DESCRIPTION OF PROBLEM: (check all that apply)

<input type="checkbox"/> Mortgage Foreclosure	<input type="checkbox"/> Request for information about existing loan
<input type="checkbox"/> Home Mortgage Loan	<input type="checkbox"/> Request for information before borrowing
<input type="checkbox"/> Auto Loan	<input type="checkbox"/> Home Improvement Problems
<input type="checkbox"/> Personal Loan	<input type="checkbox"/> Other (Describe)
<input type="checkbox"/> Credit Card Debts	<input type="checkbox"/> Other Loan(s)
<input type="checkbox"/> General Financial Problems/Budgeting	

HOUSEHOLD FINANCIAL INFORMATION IF APPLICABLE:

What is the TOTAL household income?

What are the sources of income?

How many in household? Ages?

<input type="button" value="Submit Info"/>	<input type="button" value="Reset"/>
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You may down load the PDF or print out the form and forward by fax, email or mail

3380 W. Sahara Ave. Ste. # 150

Las Vegas, NV 89102

Fax: (702) 732-9538

info@nfhc.org (link this email to the submit button)