



950 John Daly Blvd. Suite 200, Daly City, CA Tel: (650) 466-0246 / Fax: (650) 755-7064

Final Document Request Form

Borrower's Name _____ Borrower's Name _____

VESTING _____

SUBJECT PROPERTY ADDRESS _____

LOAN AMOUNT _____ TERM _____ RATE _____

PREPAYMENT PENALTY _____ PREPAID INTEREST _____

BROKER FEES

Origination Points _____ \$ _____
Appraisal Fee _____ POC \$ _____
Credit Report Fee _____ POC \$ _____
Processing Fee _____ \$ _____
Other Fee _____ \$ _____

Saxe Mortgage Co. Fees

Discount Points _____ \$ _____
Processing Fee _____ \$ 795.00
Doc Prep Fee _____ \$ 350.00
Wire Fee _____ \$ 30.00
Other Fees _____ \$ _____

Special Instructions: _____

Send Documents To: _____ Att: _____
Company Name Escrow Officer

Phone: _____ Fax: _____ Email: _____

Submitting Broker: _____ Tel: _____ Fax: _____

Contact Person: _____ Email: _____

Broker's Signature

Borrower's Signature