



WINPRIME LENDING

FHA CASE NUMBER REQUEST FORM

Transfer Cancellation

Please email to: submissions@winprimelending.com or fax to (213) 382-7779

Borrower(s) Information

	Borrower(s) : (Last, First, Mi)	SSN/TIN	Date of Birth (MM-DD-YYYY)
Borr 1	<input type="text"/>	<input type="text"/> - <input type="text"/> - <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Borr 2	<input type="text"/>	<input type="text"/> - <input type="text"/> - <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Borr 3	<input type="text"/>	<input type="text"/> - <input type="text"/> - <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Borr 4	<input type="text"/>	<input type="text"/> - <input type="text"/> - <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>

Property Address

House No	Unit	Street Name	Yr Built - MM/YYYY
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> / <input type="text"/>
City	State	Zip Code	Type
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		County	
		<input type="text"/>	

Is this a (Purchase _____ Refinance case _____)

If Purchased :

Was this case previously sold as Real Estate Owned (Previously sold By HUD)? Yes _____ No _____

If Refinance :

Was prior loan FHA Insured? Yes _____ No _____

If Yes, Enter previous case Number :

All Refinance : Select streamline refinance type _____

Not Streamline : _____ W/O Appraisal : _____ Appraisal Required : _____

Appraisal Fields

Appraiser :	License Number :
<input type="text"/>	<input type="text"/>
Assignment Date :	<input type="text"/> / <input type="text"/> / <input type="text"/>

Requested By: _____ Date: _____

Tel: _____ Fax: _____