

Attorneys

■ Jacqueline M. Hudkins

■ Benjamin E. Percy

■ Laura M. Tomasello
■ Candice M. O'Neil*

Greg Racki*

■ Martha L. Prizio
■ Dennis P. Vachon

Reema T. Maroun

Richard G. Anderson*

■ Admitted to Practice in NH & MA ■ Admitted to Practice in VT & MA

■ Admitted to Practice in MA & RI
■ Admitted to Practice in NH
■ Admitted to Practice in MA

* Of counsel

BORROWER INFORMATION

Please provide the information requested below and return via fax or email: Fax: 603-434-7226 Email: processing@hudkinslaw.com

Address of Property to be Financed:				
FULL NAME OF BORROWER:				
Social Security Number: Please circle: Married or Single				
Name of spouse if married to someone other than co-borrower:				
Daytime phone #: Evening phone #:				
Email Address:				
FULL NAME OF CO-BORROWER:				
Social Security Number: Please circle: Married or Single				
Name of spouse if married to someone other than co-borrower:				
Daytime phone #: Evening phone #:				
Email Address:				
HOMEOWNER INSURANCE INFORMATION FOR PROPERTY TO BE FINANCED:				
Insurance Company Name:				
Agent Name: Phone:				
Annual Premium: Policy Effective Dates:				



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CURRENT MORTGAGES/HOME EQUITY LINES/LIENS AGAINST PROPERTY:

Please complete the following for any and all mortgages (private or with lender) so that we may obtain payoff information:

	BANK NAME		
	BANK TELEPHONE NUMBER		
	ACCOUNT NUMBER		
	BANK NAME		
	BANK TELEPHONE NUMBER		
	ACCOUNT NUMBER		
	BANK NAME		
	BANK TELEPHONE NUMBER		
	ACCOUNT NUMBER		
I, (print borrower name) hereby authorize Hudkins Law PLLC to obtain and receive payoff information on my behalf for the above referenced loan(s).			
	Ī	BORROWER SIGNATURE	
I, receiv	(print borrower name) he payoff information on my behalf for the abo	ereby authorize Hudkins Law PLLC to obtain and ove referenced loan(s).	
	ī	BORROWER SIGNATURE	

I,

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