



WSB MORTGAGE SERVICES, INC.
Giving Older American's "Peace of Mind"

Reverse Mortgage Quote Order Form

****Fill In All Applicable Info Below to Receive an Accurate Quote, Please Print Clearly****

FAX to: 916-965-5726

Loan Officer Name:

LO Phone:

Borrower Name:

Date of Birth:

Co-Borrower Name:

Date of Birth:

Address:

City:

State:

Zip Code:

Borrower Phone:

Best Time to Call:

\$ _____
Estimate of Your Property Value (if any):

\$ _____
Current Mortgage Amount (if any):

\$ _____
Current Monthly Payment on Mortgage (if any):

\$ _____
Years Remaining to Pay off Current Mortgage:

Why do you need or want the Reverse Mortgage?

What is your biggest concern with the Reverse Mortgage?

Advisor Name (if other than Loan Officer):

Advisor Phone:

