

FHA 203K Streamline Contractor Worksheet

Borrower:	Loan #:
Property Address:	
Contractor Name:	
Contractor Address:	
Contractor Phone:	
Required Documentation:	
Contract for work to be done.	
Proof of active liability insurance	ce
Copy of current license	
At least 3 current credit reference	ces; Please complete #1-3 below.
W9 Signed by Contractor	
203K(S) Contractors Credit Aut	thorization Form
Credit Deferences	
Credit References: #1	
Company:	Account #: (If Applicable)
Contact Name:	Phone #: (
For MMC Use Only: Spoke to:On (date)):MMC Employee Signature:
If Applicable: Faxed to #:Faxed to Att	ention:On (date):
If Provided: Account Opened:High Balance:	Amount Owed: Amount Delinquent:
Comments:	
#2	
Company:	Account #: (If Applicable)
Contact Name:	Phone #: () -
):MMC Employee Signature:
	On (date):
	Amount Owed: Amount Delinquent:
- Commence:	
#3	
Company:	Account #:
Contact Name:	Phone #: (
For MMC Use Only: Spoke to: On (date)): MMC Employee Signature:
	ention:On (date):
	Amount Owed: Amount Delinquent: