

**FHA STREAMLINED 203(k) LIMITED REPAIR LOAN PROGRAM
CONTRACTOR PROFILE REPORT**

For Lender Use Only:

Case Number: _____

Borrower's Name: _____

Property Address, City, St, Zip: _____

DATE: _____

CONTRACTOR'S COMPANY NAME: _____

CONTACT PERSON: _____

ADDRESS, CITY, ST, ZIP: _____

PHONE NUMBER: _____ FAX NUMBER: _____

E-MAIL ADDRESS: _____

CORPORATION JOINT VENTURE PARTNERSHIP INDIVIDUAL OTHER: _____

NUMBER OF YEARS ORGANIZATION HAS BEEN IN BUSINESS UNDER PRESENT NAME: _____

JURISDICTION(S) IN WHICH YOU ARE LEGALLY LICENSED/QUALIFIED TO DO BUSINESS: _____

LICENSE NUMBER: _____ LICENSE TYPE: _____

LIST THE TYPES OF WORK PERFORMED DIRECTLY BY YOUR ORGANIZATION: _____

PROVIDE INFORMATION ON AT LEAST THREE PROJECTS COMPLETED BY YOU OR YOUR ORGANIZATION WITHIN THE LAST YEAR. PLEASE INCLUDE THE NAME AND LOCATION OF THE PROJECTS, CONTACT INFORMATION, CONTRACT AMOUNTS, AND DATES OF COMPLETION. ATTACH SEPARATE SHEET IF NECESSARY

1. _____

2. _____

3. _____

ARE THERE ANY JUDGEMENTS, CLAIMS, ARBITRATION PROCEEDINGS OR SUITS PENDING OR OUTSTANDING AGAINST YOU OR YOUR ORGANIZATION OR ITS OFFICER? _____ IF SO, DESCRIBE IN AN ATTACHED DOCUMENT.

HAVE YOU OR YOUR ORGANIZATION FILED ANY LAWSUITS OR REQUESTED ARBITRATION WITH REGARD TO CONSTRUCTION CONTRACTS WITHIN THE LAST 5 YEARS? _____. IF SO, DESCRIBE IN AN ATTACHED DOCUMENT.

FINANCIAL REFERENCES: INCLUDE BANKS/CREDITORS/BONDING COMPANIES (Include Phone Number)

1. _____

2. _____

3. _____

INSURANCE CO.	TYPE	AMOUNT
_____	_____	\$ _____

INSURANCE CO. CONTACT	PHONE#
_____	_____

CONTRACTOR REPRESENTS AND WARRANTS THAT ALL INFORMATION IN THIS CONTRACTOR PROFILE IS COMPLETE AND ACCURATE. CONTRACTOR AUTHORIZES THE BORROWER AND/OR LENDER TO CONTACT THE REFERENCES LISTED ABOVE IN ORDER TO VERIFY THE INFORMATION IS COMPLETE AND ACCURATE.

CONTRACTOR'S COMPANY NAME: _____

PRINTED NAME: _____ TITLE: _____

SIGNATURE: _____ DATE: _____

ADDITIONAL NOTES:

