

**NATIONAL BUILDERS CONTROL, INC.**

1110 E. MAIN STREET • ALHAMBRA, CALIFORNIA 91801

(626) 281-8883 FAX (626) 281-7202

<http://www.nbc-inc.com>

JOB NUMBER

LENDER'S JOB INFORMATION

LENDER INFORMATION		Thursday, April 12, 2012	
LENDER'S NAME:			
LENDER'S ADDRESS:			
LOAN OFFICER & TITLE:			
PHONE:		FAX:	
E-MAIL REPORTS TO:			
E-MAIL FUND REQUESTS TO:			
ONLINE ACCESS REQUESTED:		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> REGISTERED <input type="checkbox"/> PLEASE SEND REGISTRATION FORM	
BORROWER INFORMATION			
BORROWER'S NAME:			
AUTHORIZED SIGNATURES:			
BORROWER'S ADDRESS:			
BORROWER'S PHONE:			
BORROWER'S CELL/PAGER:		EMAIL:	
CONTRACTOR INFORMATION			
CONTRACTOR'S NAME:			
AUTHORIZED SIGNATURES:			
CONTRACTOR'S ADDRESS:			
CONTRACTOR'S PHONE:		FAX:	
CONTRACTOR'S CELL/PAGER		EMAIL:	
CONTRACTOR'S LICENSE #:		TAX ID#:	
JOB INFORMATION			
FUNDING SYSTEM:		<input type="checkbox"/> VOUCHER <input type="checkbox"/> CO-SIGN <input type="checkbox"/> DRAW <input type="checkbox"/> SITE VISIT ONLY <input type="checkbox"/> MANAGEMENT <input type="checkbox"/> OTHER _____	
RETENTION REQUIRED BY BANK:		<input type="checkbox"/> 5% <input type="checkbox"/> 10% <input type="checkbox"/> OTHER _____	
RETENTION IMPLEMENTATION:		<input type="checkbox"/> SET UP RETENTION BUDGET FROM EACH LINE ITEM TO CREATE BC99 <input type="checkbox"/> HOLD UNCLASSIFIED @ THE END OF THE CONSTRUCTION LOAN	
COST REVIEW REQUIRED:		<input type="checkbox"/> YES <input type="checkbox"/> NO FEE _____	
FUNDING SIGNATURES REQUIRED:		<input type="checkbox"/> ONE <input type="checkbox"/> TWO <input type="checkbox"/> OTHER _____	
PAYEE LIST REQUIRED:		<input type="checkbox"/> YES <input type="checkbox"/> NO	
BUDGET TRANSFERS APPROVED BY BANK:		<input type="checkbox"/> YES <input type="checkbox"/> NO	
JOB TYPE (# UNITS AND TYPE):			
JOB ADDRESS:			
BANK LOAN AMOUNT:		LOAN TERMS:	MONTHS
CONSTRUCTION AMOUNT:		LOAN NUMBER:	
NBC SERVICE FEE:		% RATE:	
NOTES:			

PLEASE FURNISH THE FOLLOWING TO NBC:

PLANS: <input type="checkbox"/> RECEIVED <input type="checkbox"/> N/A <input type="checkbox"/> ELECTRONIC FORMAT
COST BREAKDOWN: <input type="checkbox"/> NBC FORM <input type="checkbox"/> CUSTOM <input type="checkbox"/> SOV/AIA
<input type="checkbox"/> PRELIMINARY TITLE REPORT _____
<input type="checkbox"/> PRIME CONTRACT <input type="checkbox"/> N/A OWNER/BUILDER
<input type="checkbox"/> CONTRACTOR W-9 _____
<input type="checkbox"/> BUILDING PERMIT <input type="checkbox"/> OTHER _____
<input type="checkbox"/> PARTNERSHIP/CORP INFO. _____
<input type="checkbox"/> CONSTRUCTION SCHEDULE, IF AVAILABLE

FOR NBC USE ONLY

JOB NUMBER	
JOB NAME	
MAP PAGE	PHOTOGRAPHER
SITE MAP PDF	<input type="checkbox"/> YES <input type="checkbox"/> NO CODES: <input type="checkbox"/> SOV <input type="checkbox"/> SV <input type="checkbox"/> % <input type="checkbox"/> PSS <input type="checkbox"/>
SET UP DATE	
SERVICE AGREEMENT	<input type="checkbox"/> E-MAIL <input type="checkbox"/> OVERNIGHT <input type="checkbox"/> DELIVER <input type="checkbox"/> PICK UP <input type="checkbox"/> MAIL <input type="checkbox"/> RECEIVED <input type="checkbox"/> FEE RECEIVED
COST ANALYSIS	<input type="checkbox"/> RECEIVED
MONTHS OF SERVICE	
VOUCHER PACKAGE	<input type="checkbox"/> OVERNIGHT <input type="checkbox"/> MAIL <input type="checkbox"/> PICK UP DATE: