



Expedited CD Request/Doc Order Request Form

Upload correspondence to BrokerIQ at: Carringtonwholesale.com

This is not a change request form, please use rework or COC form to request changes
 For details and questions on how to use this form, contact your Account Executive or Account Manager

Request Date: _____ CMS Loan Number: _____
 Lock Expiration Date: _____ (must have 7 days on refi and 4 days on purchases)
 Expedited CD (Prior to CTC) Anticipated Signing Date: _____

Borrower Information (as they should appear on the docs)

Borrower Name (first, last): _____ Co-Borrower Name (first, last) _____
 Non-Borrowing or Title Only Spouse: _____ Co-Borrower on Title Only: Yes No
 (if applicable)
 Vesting: _____
 POA (approval required prior to docs) No Yes (attach copy of POA and hand signed LOE from borrower)

Required items for CD – must have all items to issue CD

- Not uploading these items with this form will delay your CD:**
- Appraisal invoice – if POC, invoice must show paid
 - Credit report invoice
 - Processing invoice and 3rd party attestation
 - Invoices for any other charges – VOE, termite, inspections
 - Most current payoff demand – must be good through closing
 - Most current title fee sheet – must be dated within 2 weeks
 - Current HOI with invoice showing if paid-in-full or if balance is due
 - Current Tax Certificate
 - Wire Transfer Instructions

Loan Information

Term 30 Years 15 years _____ ARM Term
 Loan Program: _____
 Appraised Value \$ _____
 Full Loan Amount \$ _____
 Sales Price \$ _____ Interest Rate: _____ %
 First Payment: _____ Signing Date: _____
 Property Type: _____
 PUD or Condo Name: _____

Fees: Must match most recently disclosed LE and within APR tolerance. Please obtain most updated Title and Escrow Fees

Appraisal Fee (invoice required)	Amount	_____
POC Yes No	\$	_____
Broker Reimbursed Yes No	\$	_____
	Amount	
Credit Report Fee (invoice required)	\$	_____
	\$	_____
	\$	_____
Processing Fee (invoice required)	\$	_____
FHA-MIP / VA-FF / USDA Guarantee	\$	_____

Escrow Company Information

Company Name: _____ License # _____
 Escrow Officer Name: _____ License # _____
 Phone: _____ E-mail for Dos: _____
 Address: _____
 City: _____ State: _____ Zip: _____

Title Company Information

Company Name: _____
 Title Officer: _____ License # _____
 E-mail: _____
 Address: _____
 City: _____ State: _____ Zip: _____

Other Contact Information - PURCHASE TRANSACTIONS ONLY

A. PROPERTY SELLER REALTOR INFORMATION

Real Estate Company Name: _____ License # _____
 Agent Name: _____ E-mail: _____
 Agent Phone: _____ Agent License # _____
 Address: _____

B. BUYER/BORROWER REALTOR INFORMATION

Real Estate Company Name: _____ License # _____
 Agent Name: _____ E-mail: _____
 Agent Phone: _____ Agent License # _____
 Address: _____

C. PROPERTY SELLER INFORMATION

Property Seller Name: _____ Address: _____