

Exhibit P
Mortgage Credit Certificate Program
Reservation Request

(Backup Document – Contact Single Family before Submission)

Originator _____

	Name	Phone	Email
Loan Officer	_____	_____	_____
Processor	_____	_____	_____
Underwriter	_____	_____	_____
Manager	_____	_____	_____

Mortgage Loan Amount _____ Estimated Closing Date _____

Acquisition Cost _____

Applicant(s)	Social Security Number(s)	Date of Birth	Sex	Race
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Credit Score _____ Number in Household _____ Ethnicity _____

Marital Status _____ Total Household Income _____

Number of Household Members Employed _____ First Time Home Buyer _____

Property Address _____

City _____ Parish _____

Zip Code _____ Census Tract _____ Unit(s) _____ Year Built _____

Target / Non Target _____ Number of Bedrooms _____ Property Type _____

I CERTIFY TO THE BEST OF MY KNOWLEDGE THAT THE INFORMATION ABOVE IS TRUE AND CORRECT.

Date: _____ Preparer's Name: _____

Preparer's Title: _____

LHC SINGLE FAMILY REQUIRED DOCUMENT AS OF 10012016