CommunityWorks
Building People & Places

Beaufort Memorial HOSPITAL

Beaufort Memorial Employee Homebuyer Assistance Program
Lender Checklist

Customer Name: _____ **Closing Date:** _____

TO BE SUBMITTED BEFORE CLOSING

- ☐ **Completed CW Application** (http://www.vistashare.com/ot2/ssview/intake/Pe7WpB9JnR2yQ3EGSjot5uDcClwcrM)
- ☐ **Uniform Residential Loan Application (1003)**
- ☐ **Paystubs***
- ☐ **W-2**
- ☐ **Form 1040**
- ☐ **Homebuyer Education Certificate**
- ☐ **Loan Estimate**
- ☐ **Loan Preapproval Letter**
- ☐ **Appraisal (when available)**
- ☐ **Proof of Earnest Money Funds**
- ☐ **Initial Closing Disclosure (when available)**
- ☐ **Final Closing Disclosure (when available)**

TO BE SUBMITTED AFTER CLOSING

- ☐ **Recorded CW Mortgage**
- ☐ **CW Promissory Note**
- ☐ **Notice to Seller**
- ☐ **Media Release**

***If paid weekly or bi-weekly, will need a month's worth of stubs. If paid monthly, will need at least 2 month's worth of stubs.**