

**THREE OBJECTIVES** | Affordable • Comfortable • See If You Qualify

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**3**

Mortgage/Rent: \_\_\_\_\_ Mortgage Term: 15 • 20 • 30 | Refi or Purchase  
House Value: \_\_\_\_\_ Monthly Payment: \_\_\_\_\_  
Equity: \_\_\_\_\_ Do you pay extra toward mortgage to pay off loan early? Y / N \_\_\_\_\_

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**2**

Name: _____ Age: _____	Name: _____ Age: _____
Occupation: _____	Occupation: _____
Monthly Income: _____	Monthly Income: _____
Medications: _____ Smoker: Y / N	Medications: _____ Smoker: Y / N
Surgeries: _____	Surgeries: _____
Family: _____	Family: _____

**1**

**Medical Conditions:** Heart Attack / Stroke / TIA / Cancer / Stints / Diabetes (Pills vs Insulin) / Neuropathy / HBP / Lupus/RA / Asthma & COPD (Albuterol vs Corticosteroid) / Thyroid / Anxiety-Depression / Kidney or Liver Disease

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**4**

What do you have to offset the cost of the mortgage when you die? Amount: \$ \_\_\_\_\_  
401k • IRA • STOCKS • BONDS • MUTUAL FUNDS • C.D.'S • SIGNIFICANT SAVINGS

Do you have life insurance? Y / N - Private / Work

If Yes, with who? How much? \_\_\_\_\_ Beneficiary: \_\_\_\_\_