



REQUEST FOR CLOSING

Please send to txcloser@clearpointfunding.com
to schedule closing once CTC

Please note we require at least 48 hours notice

Date		Loan Number	
Contact Name		Borrower	
Contact Phone #		Address	
Contact Email			
Broker License Number		Company License Number	
Date Docs Needed		Pur. / Refi / Streamline?	
Signing Date		Escrows?	
Signing Time		Interest Credit?*	
Signing Date		*interest credit good for funding up through the 7th of the month	
Closing/Escrow Agent			
Closing/Escrow Agent Address			
Closing/Escrow Agent Phone Number		Fax	
Email Address for Closing Package			
Rate		Loan Amount	Loan Term

Fee Breakdown	Amount	Paid to	Paid By		
			Borrower	Broker	POC
Funding Fee	\$800	ClearPoint Funding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Processing			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Broker Fee/Origination Pts (Paid By Borrower)		Broker	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attorney Doc Review		BMG	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other:			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other:			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Broker Compensation (paid by ClearPoint Funding)		Broker			
Premium Credit (paid by ClearPoint Funding)		Borrower			
Discount Points		ClearPoint Funding	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Appraisal			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Credit Report			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>