



**F&M Mortgage**



## BUILDER PROFILE

### BUILDER INFORMATION

Company Name:	Phone Number:
Contact Person:	Cell Number:
Email Address:	Fax Number:
Company Address:	
Website:	

### ORGANIZATION INFORMATION

Corporation	<input type="checkbox"/>	Partnership	<input type="checkbox"/>	LLC	<input type="checkbox"/>	Joint Venture	<input type="checkbox"/>
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### PRINCIPAL OFFICERS/OWNERS

Name:		Title:	
Name:		Title:	
Number of Years in which Organization has been in business under present name:			
Tax Identification Number:			
Number of Locations:			
General Contractor License Number:			
Dealers License Number:			
Installers License Number:			
List States legally licensed/qualified to conduct business:			

### WIRING INSTRUCTIONS (FOR DRAW DISBURSEMENT)

Bank Name:	Email Address:
Contact Person:	Phone Number:
Routing Information:	Account Number :
Special Instructions:	



### RECOMMENDED APPRAISER

Company Name:	Phone Number:
Contact Person:	Cell Number:
Email Address:	Fax Number:
Company Address:	

### RECOMMENDED APPRAISER

Company Name:	Phone Number:
Contact Person:	Cell Number:
Email Address:	Fax Number:
Company Address:	

### RECOMMENDED APPRAISER

Company Name:	Phone Number:
Contact Person:	Cell Number:
Email Address:	Fax Number:
Company Address:	

### RECOMMENDED APPRAISER

Company Name:	Phone Number:
Contact Person:	Cell Number:
Email Address:	Fax Number:
Company Address:	

### TITLE COMPANY/ATTORNEY NAME

Company Name:	Phone Number:
Contact Person:	Cell Number:
Email Address:	Fax Number:
Company Address:	
Website:	



### SALES TEAM AND OFFICE STAFF

Name:		Title:	
Email:		Phone:	
Name:		Title:	
Email:		Phone:	
Name:		Title:	
Email:		Phone:	

### SALES HISTORY

Homes Completed in Last 12 Months:	
Homes Currently Under Construction:	
Average Homes Built Per Year:	
Factory Partners:	

### INSURANCE

Please forward Certificates of Insurance Coverage to [ybillet@fmhome.com](mailto:ybillet@fmhome.com) or Fax the documents along with this application to 540-433-6903, Attn: Yana. Use the spaces provided to explain why the coverage may or may not apply.

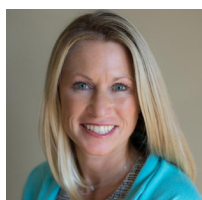
<input type="checkbox"/> General Liability	
<input type="checkbox"/> Workmen's Compensation	
<input type="checkbox"/> Builder's Risk	
<input type="checkbox"/> VA Builder ID#	

Builder represents and warrants that all information in this Builder's Profile is complete and accurate and all required documents are submitted with application.

Builder's Signature \_\_\_\_\_ Date \_\_\_\_\_

Builder's Name (Printed) \_\_\_\_\_ Company \_\_\_\_\_

#### PLEASE RETURN:



By email to [ybillet@fmhome.com](mailto:ybillet@fmhome.com)  
 By fax to (540) 433-6903  
 Or contact Yana Billet NMLS# 406246  
 Director of Sales, Systems Built Division  
[ybillet@fmhome.com](mailto:ybillet@fmhome.com)  
 (717) 725-2833



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