



**KINECTA**  
FEDERAL CREDIT UNION

1440 Rosecrans Ave.  
Manhattan Beach, CA 90266  
800.854.4600 • www.LoanKinection.com

**FHA CASE NUMBER REQUEST FORM**

Once the loan is registered with Kinecta Federal Credit Union, complete the following fields and upload this form through LoanKinection. If LoanKinection is unavailable, eFax the form to Kinecta Loan Setup (West Coast Region: 310-727-3759, Midwest Region: 773-824-2985). Loan Setup will validate all of the necessary information and order the Case Number via FHA Connection. Once the Case Number is obtained, a Loan Setup representative will fax the Case Number Assignment and the CAIVRS to you. When you receive this information, you may then submit the file to Kinecta Federal Credit Union.

**IMPORTANT: You MUST register the file before a Case Number will be requested. The Case Number MUST be obtained before submitting the file.**

**KINECTA Loan Number (Required):** \_\_\_\_\_

SPONSORED ORIGINATOR INFORMATION		
BROKER NAME:		TAX ID # (EIN):
LOAN OFFICER:		LO NMLS ID#:
PHONE #:	FAX #:	E-MAIL ADDRESS:
ADDRESS:		

BORROWER INFORMATION		
BORROWER:	SS#:	D.O.B.
CO-BORROWER:	SS#:	D.O.B.
CO-BORROWER:	SS#:	D.O.B.
CO-BORROWER:	SS#:	D.O.B.
CO-BORROWER:	SS#:	D.O.B.

LOAN INFORMATION	
LOAN AMOUNT:	
OWNER'S ESTIMATE:	
PURCHASE PRICE:	
<b>TYPE OF LOAN:</b>	<input type="checkbox"/> Fixed <input type="checkbox"/> Other
<b>LOAN PURPOSE:</b>	<input type="checkbox"/> Purchase <input type="checkbox"/> Streamline w/ Appraisal <input type="checkbox"/> Streamline w/o Appraisal <input type="checkbox"/> Not Streamlined <input type="checkbox"/> Refinance <input type="checkbox"/> Cash-Out Refinance



Upload this form online through LoanKinection or eFax to Kinecta Loan Setup.



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WHOLESALE LENDING

**FHA CASE NUMBER REQUEST FORM**

STREAMLINE REFINANCES ONLY	
ESTIMATED CLOSING DATE:	PREVIOUS CASE NUMBER

PROPERTY INFORMATION	
SUBJECT PROPERTY ADDRESS:	
PROPERTY TYPE:	<input type="checkbox"/> SFR <input type="checkbox"/> 2-4 Unit <input type="checkbox"/> Condo <input type="checkbox"/> Site Condo                      Condo ID #: <input type="checkbox"/> Detached PUD <input type="checkbox"/> Attached PUD                      PUD ID #:
OCCUPANCY STATUS:	<input type="checkbox"/> Primary Residence <input type="checkbox"/> Second Home <input type="checkbox"/> Investment
CONSTRUCTION TYPE:	<input type="checkbox"/> Existing Construction <input type="checkbox"/> New Construction (less than one year) <input type="checkbox"/> Under Construction
MONTH/YEAR COMPLETED (MONTH REQUIRED FOR NEW OR LESS THAN ONE YEAR OLD):	<input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

SPONSORED ORIGINATOR INFORMATION	
NAME OF CONTACT PERSON(S):	
HOME PHONE NUMBER:	WORK PHONE NUMBER:
CELL PHONE NUMBER:	EMAIL:
AGENT PHONE NUMBER:	AGENT CELL NUMBER:
CONTACT PERSON PREFERENCE: <input type="checkbox"/> E-mail Preferred <input type="checkbox"/> Phone Preferred	PRIORITY RUSH REQUEST: <input type="checkbox"/> Yes <input type="checkbox"/> No

**If any information contained in this Request Form is inaccurate or incomplete, it may delay the processing of your request.**

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