



DRAW REQUEST

Borrower: _____ Phone: _____
Property _____ Date: _____
Address: _____ Lock Box #: _____
Loan #: _____

You **MUST** schedule an inspection for ALL draw requests, INCLUDING your first draw.

Inspection Date: _____

Amount of Draw Request: \$ _____

Detailed List of Work Completed and Dollar Amount
(Draw checks will be distributed in 3 to 5 business days from the date of this draw request)

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Borrower Signature

Date

FAX OR MAIL COMPLETED DRAW REQUEST FORM TO:

Kristine Heinrich
38705 7 Mile Rd, Suite 195
Livonia, MI 48152
(248) 692-1100 x. 228
(248) 232-1505 – Fax
kheinrich@1nationfinancial.com



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