Rehab Draw Request

Submit this form with invoices and receipts to **servicing@altaloans.com**

REQUEST INFORMATION

REQUEST DATE *

LOAN NUMBER *

PROPERTY ADDRESS *

BORROWER / ENTITY NAME *

BORROWER EMAIL *

BORROWER PHONE *

COMPLETED REPAIRS

Each item must correspond with the approved scope of work.

#	DESCRIPTION	AMOUNT
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

TOTAL AMOUNT REQUESTED (CALCULATED) *

I certify that the work listed above has been completed and the attached documentation is accurate.

BORROWER / AUTHORIZED DIGITAL SIGNATURE *

Click to sign digitally

DATE *

Banking Information

Enter the account that should receive approved draw proceeds.

For account changes, Altaloans may request a voided check or bank verification letter.

BANK ACCOUNT DETAILS

BANK NAME *

NAME ON ACCOUNT *

BANK ADDRESS *

ACCOUNT HOLDER STREET ADDRESS *

CITY *

STATE *

ZIP *

ACCOUNT NUMBER *

ROUTING NUMBER *

ACCOUNT TYPE *

- [ ] Checking
- [ ] Savings

ATTACHMENTS

Check all items included with this request, as applicable.

- [ ] Invoices and receipts
- [ ] Signed lien releases
- [ ] Photos of completed work
- [ ] Voided check or bank letter

AUTHORIZATION

I authorize Altaloans to use the banking instructions above for this approved draw request.
I understand that additional verification may be required before funds are released.

AUTHORIZED SIGNER NAME *

TITLE / CAPACITY

AUTHORIZED DIGITAL SIGNATURE *

Click to sign digitally

DATE *