



Fax Repair Detail Form along with Loan Request Form to your Local Marketing Representative or ILS Headquarters

REPAIR DETAIL FORM

PROPERTY ADDRESS / CITY / STATE / ZIP: _____

INVESTOR NAME: _____

REPAIRS NEEDED (please itemize and provide detail):

FOUNDATION (This repair must be completed first in the repair process)				\$ _____
ROOF				\$ _____
WINDOWS				\$ _____
DOORS	Exterior \$ _____	Interior \$ _____	Garage \$ _____	\$ _____
	Patio \$ _____	Jams \$ _____		
SHEET ROCK	House \$ _____		Room \$ _____	\$ _____
PLUMBING	Re-Plumb \$ _____	Water Heat \$ _____	Tub \$ _____	\$ _____
	Toilet \$ _____			
BATH	Vanity \$ _____	Wall Tile \$ _____	Shower Stall \$ _____	\$ _____
	Shower Pan \$ _____			
KITCHEN	Countertop \$ _____	Sink \$ _____	Disposal \$ _____	\$ _____
	Cabinets \$ _____			
ELECTRICAL	Re-Wire \$ _____	Upgrade \$ _____	Fixtures \$ _____	\$ _____
	Plugs/Switches \$ _____	Appliances \$ _____		
HEAT & AIR	New \$ _____		New w/ Exist Ducts \$ _____	\$ _____
FLOORS	Carpet \$ _____	Vinyl \$ _____	Tile \$ _____	\$ _____
PAINTING	Interior \$ _____	Cabinets \$ _____	Ceiling Retex \$ _____	\$ _____
	Ext Brick \$ _____	Ext Wood \$ _____	Wall Retex \$ _____	
CARPENTRY	Siding \$ _____	Soffit Repair \$ _____	Cab Repair \$ _____	\$ _____
OTHER	Termite \$ _____	Trash \$ _____	Gutter \$ _____	\$ _____
	Garage Conv \$ _____	Landscape \$ _____	Insulation \$ _____	
OTHER (List Item)	_____			\$ _____
	_____			\$ _____

REPAIR TOTAL \$ _____

Signature _____ Date _____