

DFW Investor Lending, LLC

Fax Repair Draw Request to 972-398-8401

All Draws must be submitted by Wednesday at 5:00, All Fundings will be on Friday by close of business. Each Repair Item must match that amount found on the Property Analysis Form and items must be 100% complete before the line item funds are released.

REPAIR DRAW REQUEST

Company Name: _____ Borrower Name: _____
 Property Address: _____ City: _____ State: _____
 Zip: _____ Contact Phone: _____ Access to Property: _____

Please _____ Wire Funds or _____ I will pick up check or _____ Mail check
Funds will be wired to Borrower (not to contractor performing repairs)

Wire Information:

Bank Name: _____ Account Number: _____ Routing: _____
 Bank Address: _____ Name on Acct: _____

PROPERTY LOCATION

Address: _____ City/State/Zip: _____
 Access to property instructions: _____
 Date Property is to be inspected: _____

LIST OF REPAIRS TO BE PAID - EACH REPAIR ITEM MUST BE 100% COMPLETE

	Description of Repairs	Scheduled Cost
1		
2		
3		
4		
5		
6		
7		
8		
TOTAL DRAW AMOUNT		
LESS DRAW INSPECTION FEE (charged for each Draw Inspection)		
LESS OTHER FEE(S) (describe)		
NET DRAW AMOUNT		

I certify the above listed repairs will be completed in a safe, sound and sanitary manner prior to inspection.
 I authorize DFWLS to deduct my upcoming monthly interim payment(s) from my Repair Draw funds if the Repair Draw Request is submitted on, or after, the 25th of this month.

Signed _____ Date _____