

**Date:** [Date]

**To:** [Seller Name / Real Estate Agent Name]

**Property Address:** [Property Address, City, State, Zip]

**RE: Mortgage Pre-Qualification for [Physician Name(s)]**

To Whom It May Concern,

It is my pleasure to provide this pre-qualification letter for [Physician Name]. Based on our initial review of their financial information, credit profile, and employment status as an Attending Physician at [Hospital/Clinic Name], they have been pre-qualified for a mortgage loan under our Specialized Physician Loan Program.

**Loan Terms and Qualifications:**

- **Maximum Purchase Price:** \$[Amount]
- **Loan Amount:** \$[Amount]
- **Loan Type:** Physician Mortgage (Doctor Loan)
- **Down Payment:** [Percentage]% (\$[Amount])

This pre-qualification is based on the following criteria specific to our medical professional program:

- Verification of Attending Physician status and associated income.
- Review of credit history and debt-to-income ratio (including specialized treatment of student loan debt).
- Available liquid assets for closing costs and reserves.

This letter is not a formal loan commitment. Final approval is subject to a satisfactory appraisal of the subject property, a clean title report, and no material changes to the borrower's financial condition prior to closing.

If you have any questions or require further verification, please contact me directly at [Phone Number] or [Email Address].

Sincerely,

[Loan Officer Name]

[Title]

[NMLS Number]

[Lending Institution Name]