

**Date:** [Date]

**To:** [Seller Name / Realtor Name]

**Subject:** Pre-Qualification Letter for Physician Mortgage Program

**Borrower(s):** [Borrower Name(s)]

**Property Address:** [Property Address or "To Be Determined"]

To Whom It May Concern,

I am pleased to inform you that [Borrower Name(s)] has been pre-qualified for a residential mortgage loan through our Physician Loan Program. This specialized program is designed specifically for medical professionals and allows for unique financing terms.

Based on a preliminary review of their credit report, income documentation, and employment verification, the borrowers are qualified for the following:

- **Loan Type:** Physician Mortgage (Doctor Loan)
- **Down Payment:** 0% (Zero Down Payment)
- **Maximum Purchase Price:** \$[Amount]
- **Mortgage Insurance:** Not Required (No PMI)

This pre-qualification is based on the borrower's status as a [Type of Doctor/Resident/Fellow] and accounts for their student loan debt as per our specific physician underwriting guidelines. The borrower has been cleared to make an offer on a primary residence under these terms.

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

If you have any questions regarding this pre-qualification or the specific benefits of the Physician Loan Program, please feel free to contact me directly.

Sincerely,

[Loan Officer Name]

[Title]

[NMLS Number]

[Lending Institution Name]

[Phone Number]

[Email Address]