

# Uniform Residential Loan Application

This application is designed to be completed by the applicant(s) with the Lender's assistance. Applicants should complete this form as "Borrower" or "Co-Borrower", as applicable. Co-Borrower information must also be provided (and the appropriate box checked) when  the income or assets of a person other than the "Borrower" (including the Borrower's spouse) will be used as a basis for loan qualification or  the income or assets of the Borrower's spouse or other person who has community property rights pursuant to state law will not be used as a basis for loan qualification, but his or her liabilities must be considered because the spouse or other person has community property rights pursuant to applicable law and Borrower resides in a community property state, the security property is located in a community property state, or the Borrower is relying on other property located in a community property state as a basis for repayment of the loan.

If this is an application for joint credit, Borrower and Co-Borrower each agree that we intend to apply for joint credit (sign below):

Borrower \_\_\_\_\_ Co-Borrower \_\_\_\_\_

## I. TYPE OF MORTGAGE AND TERMS OF LOAN

|                              |                              |   |   |  |   |
|------------------------------|------------------------------|---|---|--|---|
| <b>Mortgage Applied for:</b> | <input type="checkbox"/> VA  | <input checked="" type="checkbox"/> Conventional    | <input type="checkbox"/> Other (explain): | Agency Case Number                             | Lender Case Number                        |
|                              | <input type="checkbox"/> FHA | <input type="checkbox"/> USDA/Rural Housing Service |   |  |   |
| Amount \$                    | Interest Rate %              | No. of Months                                       | <b>Amortization Type:</b>                 | <input checked="" type="checkbox"/> Fixed Rate | <input type="checkbox"/> Other (explain): |
|                              |                              |   |   | <input type="checkbox"/> GPM                   | <input type="checkbox"/> ARM (type):      |

## II. PROPERTY INFORMATION AND PURPOSE OF LOAN

|  |  |
|--|--|
| Subject Property Address (street, city, state, & ZIP)  | No. of Units   |
| Legal Description of Subject Property (attach description if necessary)  | Year Built   |
| Purpose of Loan <input checked="" type="checkbox"/> Purchase <input type="checkbox"/> Construction <input type="checkbox"/> Other (explain): | Property will be:  |
| <input type="checkbox"/> Refinance <input type="checkbox"/> Construction-Permanent   | <input checked="" type="checkbox"/> Primary Residence <input type="checkbox"/> Secondary Residence <input type="checkbox"/> Investment |

**Complete this line if construction or construction-permanent loan.**

| Year Lot Acquired | Original Cost | Amount Existing Liens | (a) Present Value of Lot | (b) Cost of Improvements | Total (a+b) |
|-------------------|---------------|-----------------------|--------------------------|--------------------------|-------------|
|                   | \$            | \$                    | \$                       | \$                       | \$          |

**Complete this line if this is a refinance loan.**

| Year Acquired | Original Cost | Amount Existing Liens | Purpose of Refinance | Describe Improvements   | Cost: \$ |
|---------------|---------------|-----------------------|----------------------|---|----------|
|               | \$            | \$                    |                      | <input type="checkbox"/> made <input type="checkbox"/> to be made |          |

|   |                                    |   |
|---|------------------------------------|---|
| Title will be held in what Name(s)  | Manner in which Title will be held | Estate will be held in:   |
|   |                                    | <input checked="" type="checkbox"/> Fee Simple<br><input type="checkbox"/> Leasehold (show expiration date) |
| Source of Down Payment, Settlement Charges and/or Subordinate Financing (explain) |                                    |   |

## III. BORROWER INFORMATION

| Borrower  | Co-Borrower   |
|---|---|
| Borrower's Name (include Jr. or Sr. if applicable)  | Co-Borrower's Name (include Jr. or Sr. if applicable)   |
| Social Security Number  | Social Security Number  |
| Home Phone (incl. area code)  | Home Phone (incl. area code)  |
| DOB (mm/dd/yyyy)  | DOB (mm/dd/yyyy)  |
| Yrs. School   | Yrs. School   |
| <input type="checkbox"/> Married (includes registered domestic partners)  | <input type="checkbox"/> Married (includes registered domestic partners)  |
| <input type="checkbox"/> Unmarried (includes single, divorced, widowed)   | <input type="checkbox"/> Unmarried (includes single, divorced, widowed)   |
| <input type="checkbox"/> Separated  | <input type="checkbox"/> Separated  |
| Dependents (not listed by Co-Borrower)  | Dependents (not listed by Borrower)   |
| No. _____   | No. _____   |
| Ages _____  | Ages _____  |
| Present Address (street, city, state, ZIP/ country) <input type="checkbox"/> Own <input type="checkbox"/> Rent ___ No. Yrs. | Present Address (street, city, state, ZIP/ country) <input type="checkbox"/> Own <input type="checkbox"/> Rent ___ No. Yrs. |
| / United States   | / United States   |
| Mailing Address, if different from Present Address  | Mailing Address, if different from Present Address  |

**If residing at present address for less than two years, complete the following:**

|   |   |
|---|---|
| Former Address (street, city, state, ZIP) <input type="checkbox"/> Own <input type="checkbox"/> Rent ___ No. Yrs. | Former Address (street, city, state, ZIP) <input type="checkbox"/> Own <input type="checkbox"/> Rent ___ No. Yrs. |
| Former Address (street, city, state, ZIP) <input type="checkbox"/> Own <input type="checkbox"/> Rent ___ No. Yrs. | Former Address (street, city, state, ZIP) <input type="checkbox"/> Own <input type="checkbox"/> Rent ___ No. Yrs. |

| Borrower                        |  | IV. EMPLOYMENT INFORMATION                    |                                 | Co-Borrower                            |   |
|---------------------------------|--|---|---------------------------------|--|---|
| Name & Address of Employer      | <input type="checkbox"/> Self Employed | Yrs. on this job                              | Name & Address of Employer      | <input type="checkbox"/> Self Employed | Yrs. on this job                              |
|                                 |  | Yrs. employed in this line of work/profession |                                 |  | Yrs. employed in this line of work/profession |
| Position/Title/Type of Business |  | Business Phone (incl. area code)              | Position/Title/Type of Business |  | Business Phone (incl. area code)              |

***If employed in current position for less than two years or if currently employed in more than one position, complete the following:***

|                                 |  |                                  |                                 |  |                                  |
|---------------------------------|--|----------------------------------|---------------------------------|--|----------------------------------|
| Name & Address of Employer      | <input type="checkbox"/> Self Employed | Dates (from-to)                  | Name & Address of Employer      | <input type="checkbox"/> Self Employed | Dates (from-to)                  |
|                                 |  | Monthly Income \$                |                                 |  | Monthly Income \$                |
| Position/Title/Type of Business |  | Business Phone (incl. area code) | Position/Title/Type of Business |  | Business Phone (incl. area code) |
| Name & Address of Employer      | <input type="checkbox"/> Self Employed | Dates (from-to)                  | Name & Address of Employer      | <input type="checkbox"/> Self Employed | Dates (from-to)                  |
|                                 |  | Monthly Income \$                |                                 |  | Monthly Income \$                |
| Position/Title/Type of Business |  | Business Phone (incl. area code) | Position/Title/Type of Business |  | Business Phone (incl. area code) |
| Name & Address of Employer      | <input type="checkbox"/> Self Employed | Dates (from-to)                  | Name & Address of Employer      | <input type="checkbox"/> Self Employed | Dates (from-to)                  |
|                                 |  | Monthly Income \$                |                                 |  | Monthly Income \$                |
| Position/Title/Type of Business |  | Business Phone (incl. area code) | Position/Title/Type of Business |  | Business Phone (incl. area code) |
| Name & Address of Employer      | <input type="checkbox"/> Self Employed | Dates (from-to)                  | Name & Address of Employer      | <input type="checkbox"/> Self Employed | Dates (from-to)                  |
|                                 |  | Monthly Income \$                |                                 |  | Monthly Income \$                |
| Position/Title/Type of Business |  | Business Phone (incl. area code) | Position/Title/Type of Business |  | Business Phone (incl. area code) |
| Name & Address of Employer      | <input type="checkbox"/> Self Employed | Dates (from-to)                  | Name & Address of Employer      | <input type="checkbox"/> Self Employed | Dates (from-to)                  |
|                                 |  | Monthly Income \$                |                                 |  | Monthly Income \$                |
| Position/Title/Type of Business |  | Business Phone (incl. area code) | Position/Title/Type of Business |  | Business Phone (incl. area code) |

**V. MONTHLY INCOME AND COMBINED HOUSING EXPENSE INFORMATION**

| Gross Monthly Income  | Borrower | Co-Borrower | Total | Combined Monthly Housing Expense | Present | Proposed |
|---|----------|-------------|-------|----------------------------------|---------|----------|
| Base Empl. Income*  | \$       | \$          | \$    | Rent                             | \$      |          |
| Overtime  |          |             |       | First Mortgage (P&I)             |         | \$       |
| Bonuses   |          |             |       | Other Financing (P&I)            |         |          |
| Commissions   |          |             |       | Hazard Insurance                 |         |          |
| Dividends/Interest  |          |             |       | Real Estate Taxes                |         |          |
| Net Rental Income   |          |             |       | Mortgage Insurance               |         |          |
| Other (before completing, see the notice in "describe other income," below) |          |             |       | Homeowner Assn. Dues             |         |          |
|   |          |             |       | Other:                           |         |          |
| Total   | \$       | \$          | \$    | Total                            | \$      | \$       |

\* Self Employed Borrower(s) may be required to provide additional documentation such as tax returns and financial statements.

**Describe Other Income**      **Notice:** Alimony, child support, or separate maintenance income need not be revealed if the Borrower (B) or Co-Borrower (C) does not choose to have it considered for repaying this loan.

| B/C | Monthly Amount |
|-----|----------------|
|     | \$             |
|     |                |
|     |                |

**VI. ASSETS AND LIABILITIES**

This Statement and any applicable supporting schedules may be completed jointly by both married and unmarried Co-borrowers if their assets and liabilities are sufficiently joined so that the Statement can be meaningfully and fairly presented on a combined basis; otherwise, separate Statements and Schedules are required. If the Co-Borrower section was completed about a non-applicant spouse or other person, this Statement and supporting schedules must be completed by that spouse or other person also.

Completed  Jointly  Not Jointly

| ASSETS  | Cash or Market Value | LIABILITIES  | Monthly Payment & Months Left to Pay | Unpaid Balance                 |
|---|----------------------|--|--------------------------------------|--------------------------------|
| Description   |                      | <b>Liabilities and Pledged Assets.</b> List the creditor's name, address and account number for all outstanding debts, including automobile loans, revolving charge accounts, real estate loans, alimony, child support, stock pledges, etc. Use continuation sheet, if necessary. Indicate by (*) those liabilities which will be satisfied upon sale of real estate owned or upon refinancing of the subject property. |                                      |                                |
| Cash deposit toward purchase held by:                                     | \$                   |  |                                      |                                |
| <b>List checking and savings accounts below</b>                           |                      |  |                                      |                                |
| Name and address of Bank, S&L, or Credit Union                            |                      | Name and address of Company  | \$ Payment/Months                    | \$                             |
|   |                      | Acct. no.  |                                      |                                |
| Acct. no.   | \$                   | Name and address of Company  | \$ Payment/Months                    | \$                             |
| Name and address of Bank, S&L, or Credit Union                            |                      |  |                                      |                                |
|   |                      | Acct. no.  |                                      |                                |
| Acct. no.   | \$                   | Name and address of Company  | \$ Payment/Months                    | \$                             |
| Name and address of Bank, S&L, or Credit Union                            |                      |  |                                      |                                |
|   |                      | Acct. no.  |                                      |                                |
| Acct. no.   | \$                   | Name and address of Company  | \$ Payment/Months                    | \$                             |
| Stocks & Bonds (Company name/number description)                          | \$                   |  |                                      |                                |
|   |                      | Acct. no.  |                                      |                                |
| Life insurance net cash value   | \$                   | Name and address of Company  | \$ Payment/Months                    | \$                             |
| Face amount: \$   |                      |  |                                      |                                |
| <b>Subtotal Liquid Assets</b>   | <b>\$</b>            | Acct. no.  |                                      |                                |
| Real estate owned (enter market value from schedule of real estate owned) | \$                   | Name and address of Company  | \$ Payment/Months                    | \$                             |
| Vested interest in retirement fund  | \$                   |  |                                      |                                |
| Net worth of business(es) owned (attach financial statement)              | \$                   | Acct. no.  |                                      |                                |
| Automobiles owned (make and year)   | \$                   | Alimony/Child Support/Separate Maintenance Payments Owed to:   | \$                                   |                                |
| Other Assets (itemize)  | \$                   | Job-Related Expense (child care, union dues, etc.)   | \$                                   |                                |
|   |                      | <b>Total Monthly Payments</b>  | <b>\$</b>                            |                                |
| <b>Total Assets a.</b>  | <b>\$</b>            | Net Worth (a minus b) =>   | \$                                   | <b>Total Liabilities b.</b> \$ |

**Schedule of Real Estate Owned** (if additional properties are owned, use continuation sheet)

| Property Address (enter S if sold, PS if pending sale or R if rental being held for income) | Type of Property | Present Market Value | Amount of Mortgages & Liens | Gross Rental Income | Mortgage Payments | Insurance, Maintenance, Taxes & Misc. | Net Rental Income |
|---|------------------|----------------------|-----------------------------|---------------------|-------------------|---------------------------------------|-------------------|
|   |                  | \$                   | \$                          | \$                  | \$                | \$                                    | \$                |
|   |                  |                      |                             |                     |                   |                                       |                   |
|   |                  |                      |                             |                     |                   |                                       |                   |
|   |                  |                      |                             |                     |                   |                                       |                   |
|   | Totals           | \$                   | \$                          | \$                  | \$                | \$                                    | \$                |

List any additional names under which credit has previously been received and indicate appropriate creditor name(s) and account number(s):

| Alternate Name | Creditor Name | Account Number |
|----------------|---------------|----------------|
|                |               |                |
|                |               |                |

| VII. DETAILS OF TRANSACTION | VIII. DECLARATIONS |
|-----------------------------|--------------------|
|-----------------------------|--------------------|

| <table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>a. Purchase price</td><td style="text-align: right;">\$</td></tr> <tr><td>b. Alterations, improvements, repairs</td><td></td></tr> <tr><td>c. Land (if acquired separately)</td><td></td></tr> <tr><td>d. Refinance (incl. debts to be paid off)</td><td></td></tr> <tr><td>e. Estimated prepaid items</td><td></td></tr> <tr><td>f. Estimated closing costs</td><td></td></tr> <tr><td>g. PMI, MIP, Funding Fee</td><td></td></tr> <tr><td>h. Discount (if Borrower will pay)</td><td></td></tr> <tr><td>i. Total costs (add items a through h)</td><td></td></tr> <tr><td>j. Subordinate financing</td><td></td></tr> <tr><td>k. Borrower's closing costs paid by Seller</td><td></td></tr> <tr><td>l. Other Credits (explain)</td><td></td></tr> <tr><td>m. Loan amount (exclude PMI, MIP, Funding Fee financed)</td><td></td></tr> <tr><td>n. PMI, MIP, Funding Fee financed</td><td></td></tr> <tr><td>o. Loan amount (add m &amp; n)</td><td></td></tr> <tr><td>p. Cash from/to Borrower (subtract j, k, l &amp; o from i)</td><td></td></tr> </table> | a. Purchase price        | \$                       | b. Alterations, improvements, repairs |                          | c. Land (if acquired separately) |  | d. Refinance (incl. debts to be paid off) |  | e. Estimated prepaid items |  | f. Estimated closing costs |  | g. PMI, MIP, Funding Fee |  | h. Discount (if Borrower will pay) |  | i. Total costs (add items a through h) |  | j. Subordinate financing |  | k. Borrower's closing costs paid by Seller |  | l. Other Credits (explain) |  | m. Loan amount (exclude PMI, MIP, Funding Fee financed) |  | n. PMI, MIP, Funding Fee financed |  | o. Loan amount (add m & n) |  | p. Cash from/to Borrower (subtract j, k, l & o from i) |  | <p><b>If you answer "Yes" to any questions a through i, please use continuation sheet for explanation.</b></p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2"></th> <th colspan="2" style="text-align: center;">Borrower</th> <th colspan="2" style="text-align: center;">Co-Borrower</th> </tr> <tr> <th style="text-align: center;">Yes</th> <th style="text-align: center;">No</th> <th style="text-align: center;">Yes</th> <th style="text-align: center;">No</th> </tr> </thead> <tbody> <tr><td>a. Are there any outstanding judgments against you?</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>b. Have you been declared bankrupt within the past 7 years?</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>c. Have you had property foreclosed upon or given title or deed in lieu thereof in the last 7 years?</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>d. Are you a party to a lawsuit?</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>e. Have you directly or indirectly been obligated on any loan which resulted in foreclosure, transfer of title in lieu of foreclosure, or judgment?<br/><small>(This would include such loans as home mortgage loans, SBA loans, home improvement loans, educational loans, manufactured (mobile) home loans, any mortgage, financial obligation, bond, or loan guarantee. If "Yes," provide details, including date, name, and address of Lender, FHA or VA case number, if any, and reasons for the action.)</small></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>f. Are you presently delinquent or in default on any Federal debt or any other loan, mortgage, financial obligation, bond, or loan guarantee?<br/>If "Yes," give details as described in the preceding question.</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>g. Are you obligated to pay alimony, child support, or separate maintenance?</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>h. Is any part of the down payment borrowed?</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>i. Are you a co-maker or endorser on a note?</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>j. Are you a U. S. citizen?</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>k. Are you a permanent resident alien?</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td><b>l. Do you intend to occupy the property as your primary residence?</b><br/>If "Yes," complete question m below.</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>m. Have you had an ownership interest in a property in the last three years?<br/>(1) What type of property did you own-principal residence (PR), second home (SH), or investment property (IP)?<br/>(2) How did you hold title to the home-solely by yourself (S), jointly with your spouse (SP), or jointly with another person (O)?</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> </tbody> </table> |  | Borrower |  | Co-Borrower |  | Yes | No | Yes | No | a. Are there any outstanding judgments against you? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | b. Have you been declared bankrupt within the past 7 years? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | c. Have you had property foreclosed upon or given title or deed in lieu thereof in the last 7 years? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | d. Are you a party to a lawsuit? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | e. Have you directly or indirectly been obligated on any loan which resulted in foreclosure, transfer of title in lieu of foreclosure, or judgment?<br><small>(This would include such loans as home mortgage loans, SBA loans, home improvement loans, educational loans, manufactured (mobile) home loans, any mortgage, financial obligation, bond, or loan guarantee. If "Yes," provide details, including date, name, and address of Lender, FHA or VA case number, if any, and reasons for the action.)</small> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | f. Are you presently delinquent or in default on any Federal debt or any other loan, mortgage, financial obligation, bond, or loan guarantee?<br>If "Yes," give details as described in the preceding question. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | g. Are you obligated to pay alimony, child support, or separate maintenance? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | h. Is any part of the down payment borrowed? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | i. Are you a co-maker or endorser on a note? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | j. Are you a U. S. citizen? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | k. Are you a permanent resident alien? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <b>l. Do you intend to occupy the property as your primary residence?</b><br>If "Yes," complete question m below. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | m. Have you had an ownership interest in a property in the last three years?<br>(1) What type of property did you own-principal residence (PR), second home (SH), or investment property (IP)?<br>(2) How did you hold title to the home-solely by yourself (S), jointly with your spouse (SP), or jointly with another person (O)? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--|--------------------------|--------------------------|---------------------------------------|--------------------------|----------------------------------|--|---|--|----------------------------|--|----------------------------|--|--------------------------|--|------------------------------------|--|--|--|--------------------------|--|--|--|----------------------------|--|---|--|-----------------------------------|--|----------------------------|--|--|--|---|--|----------|--|-------------|--|-----|----|-----|----|---|--------------------------|--------------------------|--------------------------|--------------------------|---|--------------------------|--------------------------|--------------------------|--------------------------|--|--------------------------|--------------------------|--------------------------|--------------------------|----------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|---|--------------------------|--------------------------|--------------------------|--------------------------|---|--------------------------|--------------------------|--------------------------|--------------------------|--|--------------------------|--------------------------|--------------------------|--------------------------|--|--------------------------|--------------------------|--------------------------|--------------------------|--|--------------------------|--------------------------|--------------------------|--------------------------|-----------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--|--------------------------|--------------------------|--------------------------|--------------------------|---|--------------------------|--------------------------|--------------------------|--------------------------|---|--------------------------|--------------------------|--------------------------|--------------------------|
| a. Purchase price  | \$                       |                          |                                       |                          |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |  |          |  |             |  |     |    |     |    |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |                                  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |                             |                          |                          |                          |                          |  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |
| b. Alterations, improvements, repairs  |                          |                          |                                       |                          |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |  |          |  |             |  |     |    |     |    |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |                                  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |                             |                          |                          |                          |                          |  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |
| c. Land (if acquired separately)   |                          |                          |                                       |                          |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |  |          |  |             |  |     |    |     |    |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |                                  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |                             |                          |                          |                          |                          |  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |
| d. Refinance (incl. debts to be paid off)  |                          |                          |                                       |                          |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |  |          |  |             |  |     |    |     |    |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |                                  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |                             |                          |                          |                          |                          |  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |
| e. Estimated prepaid items   |                          |                          |                                       |                          |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |  |          |  |             |  |     |    |     |    |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |                                  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |                             |                          |                          |                          |                          |  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |
| f. Estimated closing costs   |                          |                          |                                       |                          |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |  |          |  |             |  |     |    |     |    |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |                                  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |                             |                          |                          |                          |                          |  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |
| g. PMI, MIP, Funding Fee   |                          |                          |                                       |                          |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |  |          |  |             |  |     |    |     |    |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |                                  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |                             |                          |                          |                          |                          |  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |
| h. Discount (if Borrower will pay)   |                          |                          |                                       |                          |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |  |          |  |             |  |     |    |     |    |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |                                  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |                             |                          |                          |                          |                          |  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |
| i. Total costs (add items a through h)   |                          |                          |                                       |                          |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |  |          |  |             |  |     |    |     |    |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |                                  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |                             |                          |                          |                          |                          |  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |
| j. Subordinate financing   |                          |                          |                                       |                          |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |  |          |  |             |  |     |    |     |    |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |                                  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |                             |                          |                          |                          |                          |  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |
| k. Borrower's closing costs paid by Seller   |                          |                          |                                       |                          |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |  |          |  |             |  |     |    |     |    |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |                                  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |                             |                          |                          |                          |                          |  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |
| l. Other Credits (explain)   |                          |                          |                                       |                          |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |  |          |  |             |  |     |    |     |    |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |                                  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |                             |                          |                          |                          |                          |  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |
| m. Loan amount (exclude PMI, MIP, Funding Fee financed)  |                          |                          |                                       |                          |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |  |          |  |             |  |     |    |     |    |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |                                  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |                             |                          |                          |                          |                          |  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |
| n. PMI, MIP, Funding Fee financed  |                          |                          |                                       |                          |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |  |          |  |             |  |     |    |     |    |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |                                  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |                             |                          |                          |                          |                          |  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |
| o. Loan amount (add m & n)   |                          |                          |                                       |                          |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |  |          |  |             |  |     |    |     |    |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |                                  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |                             |                          |                          |                          |                          |  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |
| p. Cash from/to Borrower (subtract j, k, l & o from i)   |                          |                          |                                       |                          |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |  |          |  |             |  |     |    |     |    |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |                                  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |                             |                          |                          |                          |                          |  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |
|  | Borrower                 |                          | Co-Borrower                           |                          |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |  |          |  |             |  |     |    |     |    |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |                                  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |                             |                          |                          |                          |                          |  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |
|  | Yes                      | No                       | Yes                                   | No                       |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |  |          |  |             |  |     |    |     |    |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |                                  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |                             |                          |                          |                          |                          |  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |
| a. Are there any outstanding judgments against you?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              | <input type="checkbox"/> |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |  |          |  |             |  |     |    |     |    |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |                                  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |                             |                          |                          |                          |                          |  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |
| b. Have you been declared bankrupt within the past 7 years?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              | <input type="checkbox"/> |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |  |          |  |             |  |     |    |     |    |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |                                  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |                             |                          |                          |                          |                          |  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |
| c. Have you had property foreclosed upon or given title or deed in lieu thereof in the last 7 years?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              | <input type="checkbox"/> |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |  |          |  |             |  |     |    |     |    |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |                                  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |                             |                          |                          |                          |                          |  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |
| d. Are you a party to a lawsuit?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              | <input type="checkbox"/> |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |  |          |  |             |  |     |    |     |    |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |                                  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |                             |                          |                          |                          |                          |  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |
| e. Have you directly or indirectly been obligated on any loan which resulted in foreclosure, transfer of title in lieu of foreclosure, or judgment?<br><small>(This would include such loans as home mortgage loans, SBA loans, home improvement loans, educational loans, manufactured (mobile) home loans, any mortgage, financial obligation, bond, or loan guarantee. If "Yes," provide details, including date, name, and address of Lender, FHA or VA case number, if any, and reasons for the action.)</small>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              | <input type="checkbox"/> |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |  |          |  |             |  |     |    |     |    |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |                                  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |                             |                          |                          |                          |                          |  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |
| f. Are you presently delinquent or in default on any Federal debt or any other loan, mortgage, financial obligation, bond, or loan guarantee?<br>If "Yes," give details as described in the preceding question.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              | <input type="checkbox"/> |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |  |          |  |             |  |     |    |     |    |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |                                  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |                             |                          |                          |                          |                          |  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |
| g. Are you obligated to pay alimony, child support, or separate maintenance?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              | <input type="checkbox"/> |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |  |          |  |             |  |     |    |     |    |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |                                  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |                             |                          |                          |                          |                          |  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |
| h. Is any part of the down payment borrowed?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              | <input type="checkbox"/> |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |  |          |  |             |  |     |    |     |    |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |                                  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |                             |                          |                          |                          |                          |  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |
| i. Are you a co-maker or endorser on a note?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              | <input type="checkbox"/> |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |  |          |  |             |  |     |    |     |    |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |                                  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |                             |                          |                          |                          |                          |  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |
| j. Are you a U. S. citizen?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              | <input type="checkbox"/> |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |  |          |  |             |  |     |    |     |    |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |                                  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |                             |                          |                          |                          |                          |  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |
| k. Are you a permanent resident alien?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              | <input type="checkbox"/> |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |  |          |  |             |  |     |    |     |    |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |                                  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |                             |                          |                          |                          |                          |  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |
| <b>l. Do you intend to occupy the property as your primary residence?</b><br>If "Yes," complete question m below.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              | <input type="checkbox"/> |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |  |          |  |             |  |     |    |     |    |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |                                  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |                             |                          |                          |                          |                          |  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |
| m. Have you had an ownership interest in a property in the last three years?<br>(1) What type of property did you own-principal residence (PR), second home (SH), or investment property (IP)?<br>(2) How did you hold title to the home-solely by yourself (S), jointly with your spouse (SP), or jointly with another person (O)?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              | <input type="checkbox"/> |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |  |          |  |             |  |     |    |     |    |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |                                  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |  |                          |                          |                          |                          |                             |                          |                          |                          |                          |  |                          |                          |                          |                          |   |                          |                          |                          |                          |   |                          |                          |                          |                          |

| IX. ACKNOWLEDGEMENT AND AGREEMENT |
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Each of the undersigned specifically represents to Lender and to Lender's actual or potential agents, brokers, processors, attorneys, insurers, servicers, successors and assigns and agrees and acknowledges that: (1) the information provided in this application is true and correct as of the date set forth opposite my signature and that any intentional or negligent misrepresentation of this information contained in this application may result in civil liability, including monetary damages, to any person who may suffer any loss due to reliance upon any misrepresentation that I have made on this application, and/or in criminal penalties including, but not limited to, fine or imprisonment or both under the provisions of Title 18, United States Code, Sec. 1001, et seq.; (2) the loan requested pursuant to this application (the "Loan") will be secured by a mortgage or deed of trust on the property described in this application; (3) the property will not be used for any illegal or prohibited purpose or use; (4) all statements made in this application are made for the purpose of obtaining a residential mortgage loan; (5) the property will be occupied as indicated in this application; (6) the Lender, its servicers, successors or assigns may retain the original and/or an electronic record of this application, whether or not the loan is approved; (7) the Lender and its agents, brokers, insurers, servicers, successors and assigns may continuously rely on the information contained in the application, and I am obligated to amend and/or supplement the information provided in this application if any of the material facts that I have represented herein should change prior to closing of the Loan; (8) in the event that my payments on the Loan become delinquent, the Lender, its servicers, successors, or assigns may, in addition to any other rights and remedies that it may have relating to such delinquency, report my name and account information to one or more consumer credit reporting agencies; (9) ownership of the Loan and/or administration of the Loan account may be transferred with such notice as may be required by law; (10) neither Lender nor its agents, brokers, insurers, servicers, successors or assigns has made any representation or warranty, express or implied, to me regarding the property or the condition or value of the property; and (11) my transmission of this application as an "electronic record" containing my "electronic signature," as those terms are defined in applicable federal and/or state laws (excluding audio and video recordings), or my facsimile transmission of this application containing a facsimile of my signature, shall be as effective, enforceable and valid as if a paper version of this application were delivered containing my original written signature.

**Acknowledgement.** Each of the undersigned hereby acknowledges that any owner of the Loan, its servicers, successors and assigns, may verify or reverify any information contained in this application or obtain any information or data relating to the Loan, for any legitimate purpose through any source, including a source named in this application or a consumer reporting agency.

**Right to Receive Copy of Appraisal** I/We have the right to a copy of the appraisal report used in connection with this application for credit. To obtain a copy, I/we must send Creditor a written request at the mailing address Creditor has provided. Creditor must hear from us no later than **90** days after Creditor notifies me/us about the action taken on this application, or I/we withdraw this application.  
If you would like a copy of the appraisal report, contact: **F P F, Inc DBA First Pacific Financial 1539 Chestnut Street Redding, CA 96001**

|                                  |      |                                     |      |
|----------------------------------|------|-------------------------------------|------|
| Borrower's Signature<br><b>X</b> | Date | Co-Borrower's Signature<br><b>X</b> | Date |
|----------------------------------|------|-------------------------------------|------|

| X. INFORMATION FOR GOVERNMENT MONITORING PURPOSES |
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The following information is requested by the Federal Government for certain types of loans related to a dwelling in order to monitor the lender's compliance with equal credit opportunity, fair housing and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. The law provides that a Lender may not discriminate either on the basis of this information, or on whether you choose to furnish it. If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation. If you do not furnish ethnicity, race, or sex, under Federal regulations, this lender is required to note the information on the basis of visual observation and surname if you have made this application in person. If you do not wish to furnish the information, please check the box below. (Lender must review the above material to assure that the disclosures satisfy all requirements to which the lender is subject under applicable state law for the particular type of loan applied for.)

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| <b>BORROWER</b> <input type="checkbox"/> I do not wish to furnish this information<br><b>Ethnicity:</b> <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino<br><b>Race:</b> <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> White<br><input type="checkbox"/> Native Hawaiian or Other Pacific Islander<br><b>Sex:</b> <input type="checkbox"/> Female <input type="checkbox"/> Male | <b>CO-BORROWER</b> <input type="checkbox"/> I do not wish to furnish this information<br><b>Ethnicity:</b> <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino<br><b>Race:</b> <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> White<br><input type="checkbox"/> Native Hawaiian or Other Pacific Islander<br><b>Sex:</b> <input type="checkbox"/> Female <input type="checkbox"/> Male |
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**To be Completed by Loan Originator:**  
 This information was provided:  
 In a face-to-face interview  By the applicant and submitted by fax or mail  
 In a telephone interview  By the applicant and submitted via e-mail or the internet

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|--|--|---|
| Loan Originator's Signature<br><b>X</b>  | Date   |   |
| Loan Originator's Name (print or type)<br><b>Christy D Snow</b>  | Loan Originator Identifier<br><b>247054</b>          | Loan Originator's Phone Number (including area code)<br><b>530-223-6297/christy@firstpacificloans.com</b> |
| Loan Origination Company's Name<br><b>F P F, Inc DBA First Pacific Financial</b><br><b>(P) 530-223-6297 (F) 530-223-6239</b> | Loan Origination Company Identifier<br><b>244409</b> | Loan Origination Company's Address<br><b>1539 Chestnut Street</b><br><b>Redding, CA 96001</b>             |