



DOCUMENTS NEEDED AT SUBMISSION
CONVENTIONAL PURCHASE/REFINANCE

Borrower Name(s):

- Copy of Driver's License (legible copy)
- Copy of Green Card, Visa, or proof of legal residence (i.e. birth certificate) - legible front & back copy
- Copy of Social Security Card
- 1 month of paycheck stubs – *Not applicable for self-employed*
- 2 years of W-2s (all jobs) – *Not applicable for self-employed*
- 2 years of tax returns (include all schedules)
- 2 months bank statements (all checking and savings accounts)
- 2 months investment statements (IRA, 401k, stocks, bonds, mutual funds certificate of deposits (CDs), life insurance, etc.)
- Homeowner insurance policy (agent's name & phone number)
- Mortgage statement(s) – *if you currently own a home*
- Property tax bill(s) - *if you currently own a home*
- Purchase agreement - *if purchasing a home*
- Rental agreement(s) - *if you currently have a rental property*
- Home Owner Association (H.O.A.) – *if applicable*
Need: Name of Homeowner Association (i.e. Shadow Lakes H.O.A.)
Office phone number & mailing address
- Landlord Information (Property Management/Apartment Complex /Company/Landlord's Name, Phone & Fax Number, and mailing Address)



LOAN SUBMISSION FORM

Loan Officer: _____ Phone: _____

Email: _____

Applicant Information

First Name: _____ Last Name: _____

First Name: _____ Last Name: _____

Borrower's Email (must have): _____ Co-Borrower's Email: _____

Subject Property

Street: _____

City: _____ State: _____ Zip: _____

Loan Information

LOAN TYPE

Conventional
FHA
USDA
VA
Other

FIXED RATE

30 Yr Fixed
20 Yr Fixed
15 Yr Fixed
10 Yr Fixed
Other

ARM & IO ONLY

Interest Only
10/1 ARM
7/1 ARM
5/1 ARM
Other

TRANSACTION TYPE

Purchase
Rate & Term Refi
Cash Out Refi

PROPERTY TYPE

SFR
PUD
2 Units
3 Units+
Other

OCCUPANCY

Primary
2nd Home
Investment

SECOND MORTGAGE

Pay Off
Subordinate
N/A

IMPOUND

Yes
No

INTEREST RATE

_____ %

LOCKED

Yes, Expire _____
No

Cash to Close:

Zero Cash to Close
Roll in Closing Costs
Borrower to pay PP & CC

Purchase Price/ Value:

Loan Amount:

LTV: _____ CLTV: _____

Corp Processing
Corp Full Processing

Borrower Paid
Lender Paid

Origination: _____
YSP/Rebate: _____

Credit Credential: Login _____
Credit Credential Password: _____

Lender: _____ Program Type/Code: _____

Title/Escrow: _____ Phone: _____ Email: _____

Addtl Notes: _____

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

| | | | | | |
|------------------------------|------------------------------|---|---|-------------------------------------|---|
| Mortgage Applied for: | <input type="checkbox"/> VA | <input 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 | Amortization Type: | <input 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 1 |
| Legal Description of Subject Property (attach description if necessary) PLEASE SEE PRELIMINARY TITLE REPORT | Year Built |

| | |
|---|---|
| Purpose of Loan <input 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 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 <input type="checkbox"/> Leasehold (show expiration date) |

Source of Down Payment, Settlement Charges and/or Subordinate Financing (explain)
Checking/Savings

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 | Home Phone (incl. area code) | DOB (mm/dd/yyyy) | Yrs. School | Social Security Number | Home Phone (incl. area code) | DOB (mm/dd/yyyy) | Yrs. School |
|------------------------|------------------------------|------------------|-------------|------------------------|------------------------------|------------------|-------------|

| | | | |
|--|--|--|-------------------------------------|
| <input type="checkbox"/> Married (includes registered domestic partners) | Dependents (not listed by Co-Borrower) | <input type="checkbox"/> Married (includes registered domestic partners) | Dependents (not listed by Borrower) |
| <input type="checkbox"/> Unmarried (includes single, divorced, widowed) | No. _____ | <input type="checkbox"/> Unmarried (includes single, divorced, widowed) | No. _____ |
| <input type="checkbox"/> Separated | Ages _____ | <input type="checkbox"/> Separated | 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

| Description | ASSETS | Cash or Market Value | Liabilities and Pledged Assets. 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: | | \$ | | | | |
| | | | LIABILITIES | Monthly Payment & Months Left to Pay | Unpaid Balance | |
| List checking and savings accounts below | | | 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 | \$ | |
| 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: \$ | | | Acct. no. | | | |
| Subtotal Liquid Assets | | | Name and address of Company | \$ Payment/Months | \$ | |
| Real estate owned (enter market value from schedule of real estate owned) | | | Acct. no. | | | |
| Vested interest in retirement fund | | | Name and address of Company | \$ Payment/Months | \$ | |
| 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.) | \$ | | |
| BOAT JET SKIS RV PERSONAL PROPERTY | | | Total Monthly Payments | \$ | | |
| Total Assets a. | | | Net Worth (a minus b) => | \$ | Total Liabilities 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**

| | \$ | | Borrower | | | | Co-Borrower | | | |
|---|----|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| | | If you answer "Yes" to any questions a through i, please use continuation sheet for explanation. | Yes | | No | | Yes | | No | |
| a. Purchase price | | a. Are there any outstanding judgments against you? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Alterations, improvements, repairs | | b. Have you been declared bankrupt within the past 7 years? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Land (if acquired separately) | | 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"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Refinance (incl. debts to be paid off) | | d. Are you a party to a lawsuit? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Estimated prepaid items | | e. Have you directly or indirectly been obligated on any loan which resulted in foreclosure, transfer of title in lieu of foreclosure, or judgment? <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"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Estimated closing costs | | f. Are you presently delinquent or in default on any Federal debt or any other loan, mortgage, financial obligation, bond, or loan guarantee? If "Yes," give details as described in the preceding question. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| g. PMI, MIP, Funding Fee | | g. Are you obligated to pay alimony, child support, or separate maintenance? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| h. Discount (if Borrower will pay) | | h. Is any part of the down payment borrowed? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| i. Total costs (add items a through h) | | i. Are you a co-maker or endorser on a note? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| j. Subordinate financing | | ----- j. Are you a U. S. citizen? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| k. Borrower's closing costs paid by Seller | | k. Are you a permanent resident alien? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| l. Other Credits (explain) | | l. Do you intend to occupy the property as your primary residence? If "Yes," complete question m below. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| m. Loan amount (exclude PMI, MIP, Funding Fee financed) | | m. Have you had an ownership interest in a property in the last three years? (1) What type of property did you own-principal residence (PR), second home (SH), or investment property (IP)? (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"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| n. PMI, MIP, Funding Fee financed | | | | | | | | | | |
| o. Loan amount (add m & n) | | | | | | | | | | |
| p. Cash from/to Borrower (subtract j, k, l & o from i) | | | | | | | | | | |

IX. ACKNOWLEDGEMENT AND AGREEMENT

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: **Golden Star Inc., 185 W. Chestnut Ave., Monrovia CA 91016**

| | | | |
|----------------------------------|------|-------------------------------------|------|
| Borrower's Signature X | Date | Co-Borrower's Signature X | Date |
|----------------------------------|------|-------------------------------------|------|

X. INFORMATION FOR GOVERNMENT MONITORING PURPOSES

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.)

| | |
|--|--|
| BORROWER <input type="checkbox"/> I do not wish to furnish this information | CO-BORROWER <input type="checkbox"/> I do not wish to furnish this information |
| Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino | Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino |
| Race: <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> White | Race: <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> White |
| Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male | Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male |

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

| | | |
|---|-------------------------------------|--|
| Loan Originator's Signature X | Date | |
| Loan Originator's Name (print or type) | Loan Originator Identifier | Loan Originator's Phone Number (including area code) |
| Loan Origination Company's Name | Loan Origination Company Identifier | Loan Origination Company's Address |

Borrower Signature Authorization

Privacy Act Notice: This information is to be used by the agency collecting it or its assignees in determining whether you qualify as a prospective mortgagor under its program. It will not be disclosed outside the agency except as required and permitted by law. You do not have to provide this information, but if you do not your application for approval as a prospective mortgagor or borrower may be delayed or rejected. The information requested in this form is authorized by Title 38, USC, Chapter 37 (if VA); by 12 USC, Section 1701 et. seq. (if HUD/FHA); by 42 USC, Section 1452b (if HUD/CPD); and Title 42 USC, 1471 et. seq., or 7 USC, 1921 et. seq. (if USDA/FmHA).

Part I - General Information

| | | | |
|----------------|----------------|--|--|
| 1. Borrower(s) | | 2. Name and address of Lender/Broker Golden Star, Inc. #1437002 185 W. Chestnut Ave., Monrovia, CA 91016 Tel: 626-447-7888 Fax: 626-737-0635 | |
| 3. Date | 4. Loan Number | | |

Part II - Borrower Authorization

I hereby authorize the Lender/Broker to verify my past and present employment earnings records, bank accounts, stock holdings, and any other asset balances that are needed to process my mortgage loan application. I further authorize the Lender/Broker to order a consumer credit report and verify other credit information, including past and present mortgage and landlord references. It is understood that a copy of this form will also serve as authorization.

The information the Lender/Broker obtains is only to be used in the processing of my application for a mortgage loan.

Borrower

Date

Borrower

Date

Borrowers' Certification and Authorization

CERTIFICATION

The Undersigned certify the following:

1. I/We have applied for a mortgage loan through Golden Star Inc.. In applying for the loan, I/We completed a loan application containing various information on the purpose of the loan, the amount and source of the down payment, employment and income information, and the assets and liabilities. I/We certify that all of the information is true and complete. I/We made no misrepresentations in the loan application or other documents, nor did I/We omit any pertinent information.
2. I/We understand and agree that Golden Star Inc. reserves the right to change the mortgage loan review processes to a full documentation program. This may include verifying the information provided on the application with the employer and/or the financial institution.
3. I/We fully understand that it is a Federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements when applying for this mortgage, as applicable under the provisions of Title 18, United States Code, Section 1014.

AUTHORIZATION TO RELEASE INFORMATION

To Whom It May Concern:

1. I/We have applied for a mortgage loan through Golden Star Inc.. As part of the application process, Golden Star Inc. and the mortgage guaranty insurer (if any), may verify information contained in my/our loan application and in other documents required in connection with the loan, either before the loan is closed or as part of its quality control program.
2. I/We authorize you to provide to Golden Star Inc. and to any investor to whom Golden Star Inc. may sell my mortgage, any and all information and documentation that they request. Such information includes, but is not limited to, employment history and income; bank, money market and similar account balances; credit history; and copies of income tax returns.
3. Golden Star Inc. or any investor that purchases the mortgage may address this authorization to any party named in the loan application.
4. A copy of this authorization may be accepted as an original.

Borrower

Date

Co-Borrower

Date

Credit Card Authorization Form

Please type or print neatly and fax to *HfUbgf`cVU* at (626) 737-6035

Name:

Customer Name: Program Number:

Customer: Social Sec. # Invoice Number Invoice Total to Charge

Address: Street Address

City State/Province Zip/Postal Code

Telephone Number Fax Number (this form will be your receipt for payment)

Credit Card Company: MasterCard Visa

Cardholder's Name:

Telephone Number E-mail

Credit Card Account Number:

Expiration Date: Month* Year* Three Digit Code on Back Signature Panel*:

Leave these fields blank if you want Transglobal Lending to call the cardholder and receive this information

Credit Card Holder Billing Address: (if different from above)

Street Address

City State/Province Zip/Postal Code

I hereby authorize Transglobal Lending to use the above written credit card number for payment on the invoice associated with Social Security Number indicated above. _____ Initial here if you want Transglobal Lending to automatically charge the same credit card for all future invoice payments. This transaction will be charged to your credit card every time you reach the minimum balance threshold, unless we are otherwise notified by the client. If you choose not to accept this option, you will need to provide Transglobal Lending with a Credit Card Authorization Form for each payment transaction and/or for each credit card to be used.

I agree to inform Transglobal Lending in writing of any changes to the credit card, including expiration dates and lost or stolen cards.

Print Name:

Signature:

Date:



/ Fax

IMPORTANT

It is critical to the success of your loan package that you avoid doing any of the following until AFTER your loan has closed escrow.

1. DO NOT CHANGE JOBS.
2. DO NOT SWITCH BANKS OR MOVE YOUR MONEY AROUND.
3. DO NOT STOP MAKING MORTGAGE OR RENT PAYMENTS.
4. DO NOT MAKE ANY MAJOR PURCHASE(S).
5. DO NOT CO-SIGN FOR ANY NEW CREDIT ACCOUNT(S).
6. DO NOT TRANSFER GIFT FUNDS WITHOUT A CONSULTATION BEFOREHAND.
7. DO NOT MAKE TRAVEL ARRANGEMENTS DURING THIS TIME.
8. DO NOT MAKE AN OFFER ON A DILAPIDATED PROPERTY WITHOUT A CONSULTATION BEFOREHAND (e.g. renovation loan, escrow holdback, etc.).
9. DO NOT UNDERGO MAJOR RENOVATIONS (refinances/home equity)

Top 10 Credit Don'ts During the Loan Process

1. Don't do anything that will cause a red flag to be raised by the scoring system
2. Don't apply for new credit of any kind
3. Don't pay off collections or charge offs
4. Don't max out or over charge on your credit card accounts
5. Don't consolidate your debt onto 1 or 2 credit cards
6. Don't close credit card accounts
7. Don't pay late
8. Don't allow any accounts to run past due—even one day!
9. Don't dispute anything on your credit report
10. Don't lose contact with your mortgage and real estate professionals

If you must do any of the above, **PLEASE CONTACT YOUR LOAN OFFICER IMMEDIATELY**. Audits are done just prior to funding and you will be placing your loan in jeopardy if you do not notify us of any changes.

DO CONTINUE TO MAKE ALL PAYMENTS ON TIME.

THANK YOU FOR YOUR COOPERATION AND WE LOOK FORWARD TO A SUCCESSFUL CLOSING.

Borrower

Date

Co-Borrower

Date



| | |
|---|-----|
| / | Fax |
|---|-----|

IMPOUNDS DISCLOSURE

Under state and federal law and regulations; we are required for certain types of loans to set up and collect monies into an impound account. The funds going into this type of account are used for the payment of real estate taxes and insurance. Although we are prohibited by Section 2954 of California Civil code from requiring an impound account on owner-occupied, single family resident except where specifically required by law.

PLEASE INITIAL **ONE** ONLY:

- I/We prefer an impound account, or if an impound account is required by law.
- If the law does not require an impound account; I/We do not want one.

Borrower

Co-Borrower



BORROWER YSP DISCLOSURE

Per the 'Broker Fee Agreement', the Broker/Loan Officer may be compensated directly from the bank in the form of a Yield Spread Premium (YSP). If the borrower(s) pays of the loan (through selling the home or a refinance) within 210 days of the closing date, borrower(s) agree to pay Transglobal Lending the amount equal to the original YSP compensation. It is highly recommended that you contact your Loan Officer if you plan on paying off your loan within this 210 period.

By signing below, applicant(s) acknowledge that you have read and understand this document. By your signature, you also acknowledge that you have received a copy of this document.

Borrower Signature

Date

Co-Borrower Signature

Date

Printed Name of Borrower

Printed Name of Co-Borrower

**BORROWER'S AUTHORIZATION TO RECEIVE DOCUMENTS
ELECTRONICALLY**

I, _____, hereby give authorization for
(Borrower Name)

to send my Mortgage Loan Disclosures and Appraisal Report electronically to
my email address at _____.

This includes, but is not limited to, the initial Mortgage Loan Disclosures that may be required to process my
home loan application.

(Borrower Signature)

(Date)

(Borrower's Printed Name)

Request for Transcript of Tax Return

- ▶ **Do not sign this form unless all applicable lines have been completed.**
- ▶ **Request may be rejected if the form is incomplete or illegible.**
- ▶ **For more information about Form 4506-T, visit www.irs.gov/form4506t.**

Tip. Use Form 4506-T to order a transcript or other return information free of charge. See the product list below. You can quickly request transcripts by using our automated self-help service tools. Please visit us at IRS.gov and click on "Get a Tax Transcript..." under "Tools" or call 1-800-908-9946. If you need a copy of your return, use **Form 4506, Request for Copy of Tax Return**. There is a fee to get a copy of your return.

| | |
|---|---|
| 1a Name shown on tax return. If a joint return, enter the name shown first. | 1b First social security number on tax return, individual taxpayer identification number, or employer identification number (see instructions) |
| 2a If a joint return, enter spouse's name shown on tax return. | 2b Second social security number or individual taxpayer identification number if joint tax return |
| 3 Current name, address (including apt., room, or suite no.), city, state, and ZIP code (see instructions) | |
| 4 Previous address shown on the last return filed if different from line 3 (see instructions) | |
| 5 If the transcript or tax information is to be mailed to a third party (such as a mortgage company), enter the third party's name, address, and telephone number. | |

Caution: If the tax transcript is being mailed to a third party, ensure that you have filled in lines 6 through 9 before signing. Sign and date the form once you have filled in these lines. Completing these steps helps to protect your privacy. Once the IRS discloses your tax transcript to the third party listed on line 5, the IRS has no control over what the third party does with the information. If you would like to limit the third party's authority to disclose your transcript information, you can specify this limitation in your written agreement with the third party.

6 Transcript requested. Enter the tax form number here (1040, 1065, 1120, etc.) and check the appropriate box below. Enter only one tax form number per request. ▶ _____

a Return Transcript, which includes most of the line items of a tax return as filed with the IRS. A tax return transcript does not reflect changes made to the account after the return is processed. Transcripts are only available for the following returns: Form 1040 series, Form 1065, Form 1120, Form 1120-A, Form 1120-H, Form 1120-L, and Form 1120S. Return transcripts are available for the current year and returns processed during the prior 3 processing years. Most requests will be processed within 10 business days

b Account Transcript, which contains information on the financial status of the account, such as payments made on the account, penalty assessments, and adjustments made by you or the IRS after the return was filed. Return information is limited to items such as tax liability and estimated tax payments. Account transcripts are available for most returns. Most requests will be processed within 10 business days

c Record of Account, which provides the most detailed information as it is a combination of the Return Transcript and the Account Transcript. Available for current year and 3 prior tax years. Most requests will be processed within 10 business days

7 Verification of Nonfiling, which is proof from the IRS that you **did not** file a return for the year. Current year requests are only available after June 15th. There are no availability restrictions on prior year requests. Most requests will be processed within 10 business days

8 Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript. The IRS can provide a transcript that includes data from these information returns. State or local information is not included with the Form W-2 information. The IRS may be able to provide this transcript information for up to 10 years. Information for the current year is generally not available until the year after it is filed with the IRS. For example, W-2 information for 2011, filed in 2012, will likely not be available from the IRS until 2013. If you need W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213. Most requests will be processed within 10 business days

Caution: If you need a copy of Form W-2 or Form 1099, you should first contact the payer. To get a copy of the Form W-2 or Form 1099 filed with your return, you must use Form 4506 and request a copy of your return, which includes all attachments.

9 Year or period requested. Enter the ending date of the year or period, using the mm/dd/yyyy format. If you are requesting more than four years or periods, you must attach another Form 4506-T. For requests relating to quarterly tax returns, such as Form 941, you must enter each quarter or tax period separately.

_____ / _____ / _____ | _____ / _____ / _____ | _____ / _____ / _____ | _____ / _____ / _____

Caution: Do not sign this form unless all applicable lines have been completed.

Signature of taxpayer(s). I declare that I am either the taxpayer whose name is shown on line 1a or 2a, or a person authorized to obtain the tax information requested. If the request applies to a joint return, at least one spouse must sign. If signed by a corporate officer, 1 percent or more shareholder, partner, managing member, guardian, tax matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute Form 4506-T on behalf of the taxpayer. **Note:** For transcripts being sent to a third party, this form must be received within 120 days of the signature date.

Signatory attests that he/she has read the attestation clause and upon so reading declares that he/she has the authority to sign the Form 4506-T. See instructions.

Phone number of taxpayer on line 1a or 2a

Sign Here

| | |
|--|------|
| Signature (see instructions) | Date |
| Title (if line 1a above is a corporation, partnership, estate, or trust) | |
| Spouse's signature | Date |

Section references are to the Internal Revenue Code unless otherwise noted.

Future Developments

For the latest information about Form 4506-T and its instructions, go to www.irs.gov/form4506t. Information about any recent developments affecting Form 4506-T (such as legislation enacted after we released it) will be posted on that page.

General Instructions

Caution: Do not sign this form unless all applicable lines have been completed.

Purpose of form. Use Form 4506-T to request tax return information. You can also designate (on line 5) a third party to receive the information. Taxpayers using a tax year beginning in one calendar year and ending in the following year (fiscal tax year) must file Form 4506-T to request a return transcript.

Note: If you are unsure of which type of transcript you need, request the Record of Account, as it provides the most detailed information.

Tip. Use Form 4506, Request for Copy of Tax Return, to request copies of tax returns.

Automated transcript request. You can quickly request transcripts by using our automated self-help service tools. Please visit us at IRS.gov and click on "Get a Tax Transcript..." under "Tools" or call 1-800-908-9946.

Where to file. Mail or fax Form 4506-T to the address below for the state you lived in, or the state your business was in, when that return was filed. There are two address charts: one for individual transcripts (Form 1040 series and Form W-2) and one for all other transcripts.

If you are requesting more than one transcript or other product and the chart below shows two different addresses, send your request to the address based on the address of your most recent return.

Chart for individual transcripts (Form 1040 series and Form W-2 and Form 1099)

If you filed an individual return and lived in:

| | Mail or fax to: |
|--|--|
| Alabama, Kentucky, Louisiana, Mississippi, Tennessee, Texas, a foreign country, American Samoa, Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands, or A.P.O. or F.P.O. address | Internal Revenue Service RAIVS Team Stop 6716 AUSC Austin, TX 73301 |
| Alaska, Arizona, Arkansas, California, Colorado, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Utah, Washington, Wisconsin, Wyoming | 512-460-2272 |
| Alabama, Arizona, Arkansas, California, Colorado, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Utah, Washington, Wisconsin, Wyoming | Internal Revenue Service RAIVS Team Stop 37106 Fresno, CA 93888 |
| Connecticut, Delaware, District of Columbia, Florida, Georgia, Maine, Maryland, Massachusetts, Missouri, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Vermont, Virginia, West Virginia | Internal Revenue Service RAIVS Team Stop 6705 P-6 Kansas City, MO 64999 |
| | 816-292-6102 |

Chart for all other transcripts

If you lived in or your business was in:

| | Mail or fax to: |
|--|--|
| Alabama, Alaska, Arizona, Arkansas, California, Colorado, Florida, Hawaii, Idaho, Iowa, Kansas, Louisiana, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Texas, Utah, Washington, Wyoming, a foreign country, American Samoa, Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands, or A.P.O. or F.P.O. address | Internal Revenue Service RAIVS Team P.O. Box 9941 Mail Stop 6734 Ogden, UT 84409 |
| | 801-620-6922 |
| Connecticut, Delaware, District of Columbia, Georgia, Illinois, Indiana, Kentucky, Maine, Maryland, Massachusetts, Michigan, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Tennessee, Vermont, Virginia, West Virginia, Wisconsin | Internal Revenue Service RAIVS Team P.O. Box 145500 Stop 2800 F Cincinnati, OH 45250 |
| | 859-669-3592 |

Line 1b. Enter your employer identification number (EIN) if your request relates to a business return. Otherwise, enter the first social security number (SSN) or your individual taxpayer identification number (ITIN) shown on the return. For example, if you are requesting Form 1040 that includes Schedule C (Form 1040), enter your SSN.

Line 3. Enter your current address. If you use a P.O. box, include it on this line.

Line 4. Enter the address shown on the last return filed if different from the address entered on line 3.

Note: If the addresses on lines 3 and 4 are different and you have not changed your address with the IRS, file Form 8822, Change of Address. For a business address, file Form 8822-B, Change of Address or Responsible Party — Business.

Line 6. Enter only one tax form number per request.

Signature and date. Form 4506-T must be signed and dated by the taxpayer listed on line 1a or 2a. If you completed line 5 requesting the information be sent to a third party, the IRS must receive Form 4506-T within 120 days of the date signed by the taxpayer or it will be rejected. Ensure that all applicable lines are completed before signing.



You must check the box in the signature area to acknowledge you have the authority to sign and request the information. The form will not be processed and returned to you if the box is unchecked.

Individuals. Transcripts of jointly filed tax returns may be furnished to either spouse. Only one signature is required. Sign Form 4506-T exactly as your name appeared on the original return. If you changed your name, also sign your current name.

Corporations. Generally, Form 4506-T can be signed by: (1) an officer having legal authority to bind the corporation, (2) any person designated by the board of directors or other governing body, or (3) any officer or employee on written request by any principal officer and attested to by the secretary or other officer. A bona fide shareholder of record owning 1 percent or more of the outstanding stock of the corporation may submit a Form 4506-T but must provide documentation to support the requester's right to receive the information.

Partnerships. Generally, Form 4506-T can be signed by any person who was a member of the partnership during any part of the tax period requested on line 9.

All others. See section 6103(e) if the taxpayer has died, is insolvent, is a dissolved corporation, or if a trustee, guardian, executor, receiver, or administrator is acting for the taxpayer.

Note: If you are Heir at law, Next of kin, or Beneficiary you must be able to establish a material interest in the estate or trust.

Documentation. For entities other than individuals, you must attach the authorization document. For example, this could be the letter from the principal officer authorizing an employee of the corporation or the letters testamentary authorizing an individual to act for an estate.

Signature by a representative. A representative can sign Form 4506-T for a taxpayer only if the taxpayer has specifically delegated this authority to the representative on Form 2848, line 5. The representative must attach Form 2848 showing the delegation to Form 4506-T.

Privacy Act and Paperwork Reduction Act Notice.

We ask for the information on this form to establish your right to gain access to the requested tax information under the Internal Revenue Code. We need this information to properly identify the tax information and respond to your request. You are not required to request any transcript; if you do request a transcript, sections 6103 and 6109 and their regulations require you to provide this information, including your SSN or EIN. If you do not provide this information, we may not be able to process your request. Providing false or fraudulent information may subject you to penalties.

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The time needed to complete and file Form 4506-T will vary depending on individual circumstances. The estimated average time is: **Learning about the law or the form**, 10 min.; **Preparing the form**, 12 min.; and **Copying, assembling, and sending the form to the IRS**, 20 min.

If you have comments concerning the accuracy of these time estimates or suggestions for making Form 4506-T simpler, we would be happy to hear from you. You can write to:

Internal Revenue Service
Tax Forms and Publications Division
1111 Constitution Ave. NW, IR-6526
Washington, DC 20224

Do not send the form to this address. Instead, see *Where to file* on this page.

Certification of Receipt of LE (Loan Estimate) and Intent to Proceed

The undersigned certifies that the following Loan Applicant(s):

- **Has/have been provided with LE within 3 business days of application date;**
- **Has/have confirmed receipt of the LE;**
- **Has/have expressed verbally to you (Broker), their intention to proceed with the loan covered by the issued LE; and,**
- **Was/were not charged any fee prior to receipt of the LE, other than a reasonable credit report fee.**

Borrower Acknowledgement

By signing below the borrower acknowledges the above information is correct and that lender is replying on this information to approve and fund the loan.

Date: _____

Applicant's Signature

Co-Applicant's Signature

ANTI-STEERING DISCLOSURE

Loan Number: _____

Date: _____

Borrower(s): _____

Property Address: _____

The Federal Truth-in-Lending Act and Regulation Z prohibits a loan originator (the "Loan Originator") from directing or "steering" you ("you," the "Borrower") to consummate a loan based on the fact that the Loan Originator will receive compensation from the creditor (the "Creditor") in the transaction than in other transactions the Loan Originator offered or could have offered to you, unless the loan is in your interest.

"steering" means advising, counseling, or otherwise influencing you to accept the loan.

The Loan Originator must compare your loan to other possible loan offers available through the Loan Originator, if any, for which you were likely to qualify at the time the Loan Originator offered this transaction to you, to ensure that the loan you accepted is in your interest.

To ensure compliance with these requirements, the Loan Originator obtained loan options from a significant number of creditors with whom the Loan Originator regularly does business for each type of loan in which you expressed an interest and presented options to you which included:

| Type of Transaction (<i>check one</i>) | | Interest Rate | Total origination points or fees and discount points |
|---|--|---------------|--|
| | Fixed Rate Adjustable Rate | | |
| Option 1 | Loan with the lowest Interest Rate <input type="checkbox"/> | _____ % | \$ _____ |
| Option 2 | Loan with the lowest Interest Rate without negative amortization, a prepayment penalty, interest-only payments, a balloon payment in the first 7 years of the life of the loan, a demand feature, shared equity, or shared appreciation <input type="checkbox"/> | _____ % | \$ _____ |
| Option 3 | Loan with the lowest total dollar amount for origination points or fees and discount points <input type="checkbox"/> | _____ % | \$ _____ |
| <i>You are applying for a loan with the following terms</i> <input type="checkbox"/> | | _____ % | \$ _____ |

BORROWER CERTIFICATION

By signing below, I affirm the following:

- The Loan Originator presented the loan options described above, and I have determined that this loan is in my interest when compared with other available options.
- I understand that the Loan Originator and Creditor will rely on this Loan Options Certification as evidence of my determination that this loan is in my interest, and I confirm that the Loan Originator did not advise, counsel, or otherwise influence me to accept the loan for reasons other than my own benefits.

Borrower Date

Borrower Date

Authorization for the Social Security Administration (SSA) To Release Social Security Number (SSN) Verification

| | | |
|---------------|----------------|-------------------------|
| Printed Name: | Date of Birth: | Social Security Number: |
|---------------|----------------|-------------------------|

I want this information released because I am conducting the following business transaction:

Seeking A Mortgage

Reason (s) for using CBSV: (Please select all that apply)

- Mortgage Service Banking Service
- Background Check License Requirement
- Credit Check Other

with the following company ("the Company"):

Company Name: _____

Company Address: _____

I authorize the Social Security Administration to verify my name and SSN to the Company and/or the Company's Agent, if applicable, for the purpose I identified.

The name and address of the Company's Agent is:

I am the individual to whom the Social Security number was issued or the parent or legal guardian of a minor, or the legal guardian of a legally incompetent adult. I declare and affirm under the penalty of perjury that the information contained herein is true and correct. I acknowledge that if I make any representation that I know is false to obtain information from Social Security records, I could be found guilty of a misdemeanor and fined up to \$5,000.

This consent is valid only for 90 days from the date signed, unless indicated otherwise by the individual named above. If you wish to change this timeframe, fill in the following:

This consent is valid for _____ days from the date signed. _____ (Please initial.)

Signature _____ Date Signed _____

Relationship (if not the individual to whom the SSN was issued): _____

Contact information of individual signing authorization:

Address _____

City/State/Zip _____

Phone Number _____

Privacy Act Statement

SSA is authorized to collect the information on this form under Sections 205 and 1106 of the Social Security Act and the Privacy Act of 1974 (5 U.S.C. § 552a). We need this information to provide the verification of your name and SSN to the Company and/or the Company's Agent named on this form. Giving us this information is voluntary. However, we cannot honor your request to release this information without your consent. SSA may also use the information we collect on this form for such purposes authorized by law, including to ensure the Company and/or Company's Agent's appropriate use of the SSN verification service.

Paperwork Reduction Act Statement - This information collection meets the requirements of 44 U.S.C. § 3507, as amended by section 2 of the Paperwork Reduction Act of 1995. You do not need to answer these questions unless we display a valid Office of Management and Budget control number. We estimate that it will take about 3 minutes to complete the form. *You may send comments on our time estimate above to: SSA, 6401 Security Blvd., Baltimore, MD 21235-6401. **Send to this address only comments relating to our time estimate, not the completed form.***

-----TEAR OFF -----

NOTICE TO NUMBER HOLDER

The Company and/or its Agent have entered into an agreement with SSA that, among other things, includes restrictions on the further use and disclosure of SSA's verification of your SSN. To view a copy of the entire model agreement, visit <http://www.ssa.gov/cbsv/docs/SampleUserAgreement.pdf>

HOMEOWNERSHIP COUNSELING NOTICE

Loan Number:

Date:

Provided By:

Borrower(s):

Property Address:

Housing counseling agencies approved by the U.S. Department of Housing and Urban Development (HUD) can offer independent advice about whether a particular set of mortgage loan terms is a good fit based on your objectives and circumstances, often at little or no cost.

If you are interested in contacting a HUD-approved housing counseling agency in your area, you can visit the Consumer Financial Protection Bureau's (CFPB) website, www.consumerfinance.gov/find-a-housing-counselor, and enter your zip code.

You can also access HUD's housing counseling agency website via www.consumerfinance.gov/mortgagehelp.

For additional assistance with locating a housing counseling agency, call the CFPB at 1-855-411-CFPB (2372).

By signing below, I/we acknowledge that I/we have read and received a copy of this document.

Borrower Date

Borrower Date

Borrower Date

Borrower Date

Borrower Date

Borrower Date



**NOTICE TO APPLICANT OF RIGHT
TO RECEIVE COPY OF APPRAISAL REPORT**

LOAN NUMBER:

PROPERTY ADDRESS:

You have the right to receive a copy of the appraisal report to be obtained in connection with the loan for which you are applying, provided that you have paid for the appraisal. We must receive your written request no later than 90 days after we notify you about the action taken on your application or you withdraw your application. If you would like a copy of the appraisal report, contact:

(Applicant) (Date)

(Applicant) (Date)

(Applicant) (Date)

(Applicant) (Date)

APPRAISAL/VALUATION ACKNOWLEDGEMENT

Loan #:

Date:

Lender:

Borrower:

Property Address:

We may order an appraisal to determine the property's value and charge you for this appraisal. We will promptly give you a copy of any appraisal, even if your loan does not close. You can pay for an additional appraisal for your own use at your own cost.

You are entitled to receive a copy of any appraisal report or valuation ("Valuation Report") developed in connection with your application for credit at least three (3) business days prior to your closing date. A copy of each Valuation Report developed in connection with your credit application should have been delivered to you at least three (3) or more business days prior to the closing date.

If you wish to proceed with your closing, your signature will acknowledge either:

- (1) Your receipt of each Valuation Report three (3) or more business days prior to your loan closing, or, alternatively,
- (2) That you previously waived your right to receive a copy of any Valuation Report developed in connection with your credit application three (3) or more business days prior to the closing date.

Borrower

Date:

Borrower

Date:

PRIVACY POLICY DISCLOSURE

(Protection of the Privacy of Personal Non-Public Information)

Respecting and protecting customer privacy is vital to our business. By explaining our Privacy Policy to you, we trust that you will better understand how we keep our customer information private and secure while using it to serve you better. Keeping customer information secure is a top priority, and we are disclosing our policies to help you understand how we handle the personal information about you that we collect and disclose. This notice explains how you can limit our disclosing of personal information about you. The provisions of this notice will apply to former customers as well as current customers unless we state otherwise.

The Privacy Policy explains the Following:

- Protecting the confidentiality of our customer information.
- Who is covered by the Privacy Policy.
- How we gather information.
- The types of information we share, why, and with whom.
- Opting Out - how to instruct us not to share certain information about you or not to contact you.

Protecting the Confidentiality of Customer Information:

We take our responsibility to protect the privacy and confidentiality of customer information very seriously. We maintain physical, electronic, and procedural safeguards that comply with federal standards to store and secure information about you from unauthorized access, alteration, and destruction. Our control policies, for example, authorize access to customer information only by individuals who need access to do their work.

From time to time, we enter into agreements with other companies to provide services to us or make products and services available to you. Under these agreements, the companies may receive information about you but they must safeguard this information, and they may not use it for any other purposes.

Who is Covered by the Privacy Policy:

We provide our Privacy Policy to customers when they conduct business with our company. If we change our privacy policies to permit us to share additional information we have about you, as described below, or to permit disclosures to additional types of parties, you will be notified in advance. This Privacy Policy applies to consumers who are current customers or former customers.

How We Gather Information:

As part of providing you with financial products or services, we may obtain information about you from the following sources:

- Applications, forms, and other information that you provide to us, whether in writing, in person, by telephone, electronically, or by any other means. This information may include your name, address, employment information, income, and credit references;
- Your transaction with us, our affiliates, or others. This information may include your account balances, payment history, and account usage;
- Consumer reporting agencies. This information may include account information and information about your credit worthiness;
- Public sources. This information may include real estate records, employment records, telephone numbers, etc

Information We Share:

We may disclose information we have about you as permitted by law. We are required to or we may provide information about you to third-parties without your consent, as permitted by law, such as:

- To regulatory authorities and law enforcement officials.
- To protect against or prevent actual or potential fraud, unauthorized transactions, claims, or other liability.
- To report account activity to credit bureaus.
- To consumer reporting agencies.

- To respond to a subpoena or court order, judicial process or regulatory authorities.
- In connection with a proposed or actual sale, merger, or transfer of all or a portion of a business or an operating unit, etc.

In addition, we may provide information about you to our service providers to help us process your applications or service your accounts. Our service providers may include billing service providers, mail and telephone service companies, lenders, investors, title and escrow companies, appraisal companies, etc.

We may also provide information about you to our service providers to help us perform marketing services. This information provided to these service providers may include the categories of information described above under "How We Gather Information" limited to only that which we deem appropriate for these service providers to carryout their functions.

We do not provide non-public information about you to any company whose products and services are being marketed unless you authorize us to do so. These companies are not allowed to use this information for purposes beyond your specific authorization.

Opting Out

We also may share information about you within our corporate family of office(s). We may share all of the categories of information we gather about you, including identification information (such as your name and address), credit reports (such as your credit history), application information (such as your income or credit references), your account transactions and experiences with us (such as your payment history), and information from other third parties (such as your employment history).

By sharing this information we can better understand your financial needs. We can then send you notification of new products and special promotional offers that you may not otherwise know about. For example, if you originally obtained a mortgage loan with us, we would know that you are a homeowner and may be interested in hearing how a home equity loan may be a better option than an auto loan to finance the purchase of a new car.

You may prohibit the sharing of application and third-party credit-related information within our company or any third-party company at any time. If you would like to limit disclosures of personal information about you as described in this notice, just check the appropriate box or boxes to indicate your privacy choices.

- Please do not share personal information about me with non-affiliated third-parties.
- Please do not share personal information about me with any of your affiliates except as necessary to effect, administer, process, service or enforce a transaction requested or authorized by myself.
- Please do not contact me with offers of products or services by mail.
- Please do not contact me with offers of products or services by telephone.

Note for Joint Accounts: Your Opt Out choices will also apply to other individuals who are joint account holders. If these individuals have separate accounts, your Opt Out will not apply to those separate accounts.

Name

Company Name

Address

Address

City, State, Zip

City, State, Zip

Phone#

Phone #

Loan #

Borrower's Signature

Date

Co-Borrower's Signature

Date

EQUAL CREDIT OPPORTUNITY ACT

APPLICATION NO:

PROPERTY ADDRESS:

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The Federal Agency that administers compliance with this law concerning this company is the Office of the Comptroller of the Currency, Customer Assistance Group, 1301 McKinney Street, Suite 3710, Houston, Texas 77010

We are required to disclose to you that you need not disclose income from alimony, child support or separate maintenance payment if you choose not to do so.

Having made this disclosure to you, we are permitted to inquire if any of the income shown on your application is derived from such a source and to consider the likelihood of consistent payment as we do with any income on which you are relying to qualify for the loan for which you are applying.

(Applicant) (Date)

(Applicant) (Date)

THE HOUSING FINANCIAL DISCRIMINATION ACT OF 1977
FAIR LENDING NOTICE

DATE:

COMPANY:

APPLICATION NO:

PROPERTY ADDRESS:

It is illegal to discriminate in the provisions of or in the availability of financial assistance because of the consideration of:

1. Trends, characteristics or conditions in the neighborhood or geographic area surrounding a housing accommodation, unless the financial institution can demonstrate in the particular case that such consideration is required to avoid an unsafe and unsound business practice; or
2. Race, color, religion, sex, marital status, domestic partnership, national origin or ancestry.

It is illegal to consider the racial, ethnic, religious or national origin composition of a neighborhood or geographic area surrounding a housing accommodation or whether or not such composition is undergoing change, or is expected to undergo change, in appraising a housing accommodation or in determining whether or not, or under what terms and conditions, to provide financial assistance.

These provisions govern financial assistance for the purpose of the purchase, construction, rehabilitation or refinancing of a one-to-four unit family residence occupied by the owner and for the purpose of the home improvement of any one-to-four unit family residence.

If you have any questions about your rights, or if you wish to file a complaint, contact the management of this financial institution or

2550 Mariposa Mall, Suite 3070 Fresno, CA 93721-2273

320 W 4th Street, Suite 350 Los Angeles, CA 90013-1105

1515 Clay Street, Suite 702 Oakland, CA 94612-1462

1651 Exposition Blvd Sacramento, CA 95815
PO Box 137000 (mailing address) Sacramento, CA 95813-7000

1350 Front Street, Suite 3064, San Diego, CA 92101-3687

ACKNOWLEDGMENT OF RECEIPT

I (we) received a copy of this notice.

Signature of Applicant

Date

Signature of Applicant

Date

Borrower's Certification and Authorization

CERTIFICATION

The Undersigned certify the following:

1. I/We have applied for a mortgage loan from _____. In applying for the loan, I/We completed a loan application containing various information on the purpose of the loan, the amount and source of the down payment, employment and income information, and the assets and liabilities. I/We certify that all of the information is true and complete. I/We made no misrepresentations in the loan application or other documents, nor did I/We omit any pertinent information.
2. I/We understand and agree that _____ reserves the right to change the mortgage loan review processes to a full documentation program. This may include verifying the information provided on the application with the employer and/or the financial institution.
3. I/We fully understand that it is a Federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements when applying for this mortgage, as applicable under the provisions of Title 18, United States Code, Section 1014.

AUTHORIZATION TO RELEASE INFORMATION

To Whom It May Concern:

1. I/We have applied for a mortgage loan from _____. As part of the application process, _____ and the mortgage guaranty insurer (if any), may verify information contained in my/our loan application and in other documents required in connection with the loan, either before the loan is closed or as part of its quality control program.
2. I/We authorize you to provide to _____ and to any investor to whom _____ may sell my mortgage, any and all information and documentation that they request. Such information includes, but is not limited to, employment history and income; bank, money market and similar account balances; credit history; and copies of income tax returns.
3. _____ or any investor that purchases the mortgage may address this authorization to any party named in the loan application.
4. A copy of this authorization may be accepted as an original.

Borrower Signature _____

Co-Borrower Signature _____

SSN: _____ Date: _____

SSN: _____ Date: _____