

**NEW CORRESPONDENT INTAKE FORM****COMPANY INFORMATION**

Legal Name of Entity & DBA(s), as applicable: \_\_\_\_\_  
Address: \_\_\_\_\_ City, State & Zip code: \_\_\_\_\_  
Entity Type: \_\_\_\_\_ Requested Delegation: \_\_\_\_\_  
Tax ID: \_\_\_\_\_ MERS Org ID: \_\_\_\_\_ Company NMLS: \_\_\_\_\_  
Incorporation State: \_\_\_\_\_ Formation Date: \_\_\_\_\_ Website: \_\_\_\_\_  
Name: \_\_\_\_\_ Title: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**COMPANY CONTACTS**

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_  
Name: \_\_\_\_\_ Title: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_  
Name: \_\_\_\_\_ Title: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_  
Name: \_\_\_\_\_ Title: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**OWNERSHIP INFORMATION**

*Include any individual and/or company with 10% or more ownership interest*

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Ownership: \_\_\_\_\_% DOB: \_\_\_\_\_ Last 4 of SSN: \_\_\_\_\_  
Name: \_\_\_\_\_ Title: \_\_\_\_\_ Ownership: \_\_\_\_\_% DOB: \_\_\_\_\_ Last 4 of SSN: \_\_\_\_\_  
Name: \_\_\_\_\_ Title: \_\_\_\_\_ Ownership: \_\_\_\_\_% DOB: \_\_\_\_\_ Last 4 of SSN: \_\_\_\_\_  
Name: \_\_\_\_\_ Title: \_\_\_\_\_ Ownership: \_\_\_\_\_% DOB: \_\_\_\_\_ Last 4 of SSN: \_\_\_\_\_

\*\*\*To access additional Ownership Addendum, please click here\*\*\*

**STATE LICENSING**

*Please attach a copy of current NMLS record.*

Is your organization a Federally Chartered or State Chartered Bank? ☐ Federal ☐ State  
Is your organization a subsidiary of a bank or credit unions? ☐ Yes ☐ No  
*If yes, please identify the bank you are a subsidiary of:* \_\_\_\_\_

**WAREHOUSE RELATIONSHIPS**

Entity Name: \_\_\_\_\_ Line Amount: \_\_\_\_\_ Line Expiration: \_\_\_\_\_  
Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

\*\*\*To access additional Warehouse Relationships Addendum, please click here\*\*\*

**AFFILIATED COMPANIES**

*\* Affiliated Companies include any separate business entity that is fully or partially owned by either the Applicant or the Applicant's Principal(s), Director(s) or Officer(s).*

Have any affiliate relationships been terminated in the past 12 months? ☐ Yes ☐ No

For any existing affiliates\*, please provide the following information:

Company Name: \_\_\_\_\_ Length/Tenure: \_\_\_\_\_  
Company Address: \_\_\_\_\_ City, State & Zip code: \_\_\_\_\_  
Business activities: \_\_\_\_\_

## Affiliate Ownership breakdown:

Name: \_\_\_\_\_

Ownership: \_\_\_\_ %

Affiliate Production: \_\_\_\_ %

Does Applicant share employees with affiliate? ( ) Yes ( ) No

Does Applicant share office space with affiliate? ( ) Yes ( ) No

Does any employee of Applicant have signing authority at the affiliated company? ( ) Yes ( ) No

If yes, provide Name(s) &amp; Title(s): \_\_\_\_\_

**\*\*\* If affiliate is a Title Company, complete the following \*\*\***

Title Insurer: \_\_\_\_\_ Main Contact: \_\_\_\_\_

Contact Phone: \_\_\_\_\_ Contact Email: \_\_\_\_\_

**\*\*\*To access additional Affiliated Companies Addendum, please click here\*\*\*****CLOSING AND FULFILLMENT SERVICES**

Services included (no additional cost): ( ) Loan Documents

Optional Services (additional fees may apply): ( ) HUD Balance with Title ( ) Post Closing-Work Prior

( ) Order Wire: \$50 ( ) Funding Auth: \$75 ( ) Shipping-Upload: \$75 to Purchase Conditions: \$50

**DISCLOSURES**

1. Has your Company and/or principals or corporate officers had a real estate or other professional license suspended, revoked or received any other form of disciplinary action from a regulatory agency? ( ) Yes ( ) No

If yes, please elaborate: \_\_\_\_\_

2. Has your company been suspended from selling or servicing mortgages by an investor? ( ) Yes ( ) No

If yes, please elaborate: \_\_\_\_\_

3. Are you aware of any company officers or employees that are or have been on any agency, state or federal exclusionary list? ( ) Yes ( ) No

If yes, please elaborate: \_\_\_\_\_

4. Has your company, and/or principals or corporate officers been named as a defendant in a lawsuit for alleged fraud or misrepresentation in connection with any real estate related activity, been involved in any criminal proceedings or litigation in the past 7 years? ( ) Yes ( ) No

If yes, please elaborate: \_\_\_\_\_

5. Have any principals or corporate officers ever been convicted of a crime? ( ) Yes ( ) No

If yes, please elaborate: \_\_\_\_\_

6. Has your company and/or owners or corporate officers filed bankruptcy within the past 7-years? ( ) Yes ( ) No

If yes, please elaborate: \_\_\_\_\_

7. Has your company ever had material adverse findings included in any audit examination that was conducted by HUD, VA, FNMA, FHLMC, or any regulatory agency? ☐ Yes ☐ No

*If yes, please elaborate:*

8. Do you have processes in place to ensure compliance with any applicable federal, state and local high cost and anti-predatory lending statuses? ☐ Yes ☐ No

9. Have there been any settled, open, pending repurchases and/or indemnifications within the past 24 months. *If yes, please provide:*

Investor: \_\_\_\_\_ Note Date: \_\_\_\_\_ Repurchase Amount: \_\_\_\_\_

Repurchase explanation: \_\_\_\_\_

10. Has your company developed a compliance program in accordance with FinCEN's Anti-Money Laundering rules issued pursuant to the Bank Secrecy Act? ☐ Yes ☐ No

11. Do you check all employees who are involved in the origination of mortgage loans against the FHFA Suspended Counterparty Program List, General Services Administration Excluded Parties list and HUD Limited Denial Participation List? ☐ Yes ☐ No

*If no, please elaborate:*

12. Is your company in compliance with CFPB's loan originator compensation rules? ☐ Yes ☐ No

13. Is your company in compliance with SAFE Act Regulations? ☐ Yes ☐ No

14. Has your company developed a compliance program in accordance with the US Patriot Act? ☐ Yes ☐ No

15. Is your company in compliance with FNMA/FHLMC Appraiser Independence Requirements? ☐ Yes ☐ No

16. Has your company taken steps to meet CFPB Title XIV mortgage rules (provisions under Dodd Frank Wall Street Reform and Consumer Protection Act) effective January 2014? ☐ Yes ☐ No

### CERTIFICATION & AUTHORIZATION

The undersigned certifies that the statement set forth herein and in any accompanying documents are true and factual to the undersigned's best knowledge. The undersigned hereby authorizes PR Mortgage Investment, or its affiliates or agents to obtain verification of the information it may deem necessary about the Applicant and its principals from any source including any investor, governmental agency or authority, credit bureau or reporting agency, MI company, Mortgage Asset Research Institute, Inc. (MARI) or any other person or entity including warehouse guarantors.

Additionally, the undersigned and company ("We") represent and warrant that the information provided is complete and accurate in all respects. We understand that this application is made for the purpose of inducing PR Mortgage Investment to approve our request for a correspondent relationship with PR Mortgage Investment. We authorize PR Mortgage Investment to make such investigation of our financial condition and the representations contained in the application. We understand that this application shall remain the confidential property of PR Mortgage Investment for all purposes. We agree to notify you immediately of any adverse change affecting the company.

The Federal Equal Credit Opportunity Act requires that all creditors, including Banks, Savings and Loans, small loan companies, retail stores and others, make credit equally available to all credit worthy customers without regard to sex, marital status, race, color, religion, national origin, age, the fact that all or part of the applicants income is derived from a public assistance program, or the fact that this applicant has in good faith exercised any right under the Consumer Credit Protection Act or applicable state law.

Authorized Officer Signature

Officer Name/Title

Date