



Mortgage Brokers Supplement

All questions MUST be completed in full.

If space is insufficient to answer any question fully, attach a separate sheet.

Full Name Of Applicant: _____ Title: _____

Business Name: _____

Submission or policy number: _____

1. For all mortgages handled by the applicant, provide the percentage of total services provided:

Origination Only	%
Underwritten	%
Packaged And Sold	%
Servicing	%
Other (Describe)	%

2. Does the applicant or any organization controlled by, owned by, or commonly owned, affiliated or associated with the applicant:

a. Currently provide loan funding, including partial funding or short term funding, or have an in-house line of credit? Yes No

b. In the last five years provided loan funding, including partial funding or short term funding, or had an in-house line of credit? Yes No

3. Please respond to the following questions with respect to applicant licensing:

a. Does the applicant hold the appropriate licenses in the states which require Mortgage Brokers/Correspondents to be licensed? Yes No

b. In which states is the applicant licensed? _____

c. In which states does the applicant operate where they are not licensed? _____

d. Has the applicant's license ever been suspended, placed on probation, revoked or restricted in any way? Yes No

If yes, provide details: _____

4. Does the applicant hold funds in escrow? Yes No

If yes, does the applicant hold these funds in a fiduciary account? Yes No

5. Please indicate the limit for Fidelity Bond: \$ _____

6. Does the applicant or any organization controlled by, owned by, or commonly owned, affiliated or associated with the applicant perform property appraisals? Yes No

If yes, provide details: _____

7. What procedures does the applicant have in place to assure timely and proper disclosure of Good Faith and Truth in Lending Estimates? _____

8. Is the applicant aware of any violation or potential violation of laws in any of the following areas:

- a. Real Estate Settlement Procedures Act? Yes No
- b. Truth In Lending Act? Yes No
- c. Equal Credit Opportunity Act? Yes No

If yes, provide details: _____

9. Does the applicant receive compensation from yield spread premiums (YSPs)? Yes No

If yes, answer the following:

a. For each period indicated, state what percentage of the applicant's revenue is or was derived from YSPs:

Projected For The Coming Year:	%
This Year:	%
Last Year:	%
Two Years Ago:	%

b. Describe the procedures in place for disclosing the yield to premium spread to a borrower? _____

10. Has the applicant ever been denied a written correspondent or loan broker agreement with a lender? Yes No

If yes, provide details: _____

11. Has any mortgage lender ever cancelled or withdrawn a written correspondent or loan broker agreement? Yes No

If yes, provide details: _____

12. Please answer the following questions with respect to the applicant's mortgage activities:

a. Total dollar value of mortgages brokered during the last 12 months: \$_____

b. Number of mortgages closed in the last 12 months: \$_____

c. Dollar amount of largest loan closed in the last:

12 Months	\$
24 Months	\$
36 Months	\$

d. Provide the percentages for each mortgage type (Does not need to equal 100%):

Conventional: %	Government: %
First Mortgage: %	Second Mortgage: %
Owner Occupied: %	Non-Owner Occupied: %
Purchase: %	Refinance: %
Conforming: %	Non-Conforming: %

e. Provide the percentages for each mortgage type for each period indicated (Does not need to equal 100%):

	Prior 12 Months	Prior 24 Months	Prior 36 Months
Reverse Mortgages:	%	%	%
Interest only:	%	%	%
Prime (A paper):	%	%	%
Sub-Prime (B or below):	%	%	%

	Prior 12 Months	Prior 24 Months	Prior 36 Months
Residential:	%	%	%
Commercial:	%	%	%
Fixed rate:	%	%	%
Adjustable rate:	%	%	%

13. Does the applicant receive referrals from a parent company or any organization controlled by, owned by, or commonly owned, affiliated or associated with the applicant? Yes No

If yes, provide details: _____

14. Has the applicant ever closed a loan with a lender that is currently in bankruptcy or no longer in business? Yes No

If yes, list the defunct mortgage lending companies the applicant represented and the number of loans placed with each:

Company	Number Of Loans

Signing this supplement does not bind the company to provide, or the applicant to purchase, the insurance.

It is understood that information submitted herein becomes a part of our application for insurance and is subject to the same declarations, representations and conditions.

Must be signed by director, executive officer, partner or equivalent within 60 days of the proposed effective date.

 Name of Applicant

 Title (Officer, partner, etc.)

 Signature of Applicant

 Date

(Florida only) Agent license number: _____