Universal Credit Application

(Consumer Real Estate)

Lender Use Only

Lender Case No./HMDA ULI **HMDA Reportable Census Tract** Type of Application (Check only one of the four checkboxes; and sign, if joint credit) Individual Credit. If checked, this is an Application for Individual Credit - relying solely on my income and assets. Individual Credit with Another. If checked, this is an Application for Individual Credit - relying on my income and assets and on income and/or assets of another as a basis for loan qualification. (Complete Applicant and Co-Applicant sections.) Individual Credit (Community Property State). If checked, this is an *Application for Individual Credit* - relying on my income or assets. The income or assets of my spouse (or other person), who has community property rights pursuant to state law, will not be used as a basis for loan qualification. However, his or her liabilities must be considered because my spouse (or other person) has community property rights pursuant to applicable law, and, as Applicant, I reside in a community property state, the property that will secure the loan is located in a community property state, or I am relying on other property located in a community property state as a basis for repayment of the loan. (Complete Applicant and Co-Applicant sections.) **Joint Credit**. If checked, this is an *Application for Joint Credit*. By signing below, the Applicant and Co-Applicant agree that each of us intend to apply for joint credit. (Complete Applicant and Co-Applicant sections.) **Applicant for Joint Credit** Co-Applicant for Joint Credit 2. Type of Mortgage and Terms of Credit Mortgage Applied For Lender's Case No. Home Purchase or Refinancing $\ \square$ Home Equity Loan $\ \square$ Home Equity Line of Credit Amount/Credit Limit Interest Rate No. of Months Amortization Type ☐ Fixed ☐ ARM 3. Property Information and Purpose of Credit Subject Property Address (street, city, state & ZIP No. of Units Legal Description of Subject Property (attach description if necessary) Year Built Purpose of Loan Property will be: ☐ Purchase Construction □ Other: Primary Secondary \square Investment Residence Residence Refinance □ Construction-Permanent Complete this line if construction or construction-permanent loan. Year Lot | Original Cost Amount Existina (a) Present Value of (b) Cost of Total (a + b)Acquired Liens Lot Improvements Ś \$ Complete this line if this is a refinance loan. Describe Improvements Year **Original Cost** Amount Existing Purpose of Refinance ☐ made □ to be made Liens Acquired Cost: \$ Title will be held in what Name(s) Manner in which Title will be held Estate will be held in: ☐ Fee Simple Source of Down Payment, Settlement Charges, and/or Subordinate Financing (explain) Leasehold (show expiration date) **Applicant** 4. Applicant Information Co-Applicant Applicant's Name Co-Applicant's Name Social Security No. Primary Phone Date of Birth Social Security No. Primary Phone Date of Birth ID Type & No. Issued By Issue Date Exp. Date ID Type & No. Issued By Issue Date Exp. Date E-mail Address E-mail Address Separated □ Separated Dependents Dependents Married Married (including registered domestic partner or civil union) (including registered domestic partner or civil union) (not listed by Co-Applicant) (not listed by Applicant) Ages No. Ages Unmarried Unmarried (including single, divorced, widowed) (including single, divorced, widowed) Present Address ☐ Own ☐ Rent Present Address ☐ Own ☐ Rent Mailing Address, if different from Present Address Mailing Address, if different from Present Address Former Address ☐ Own ☐ Rent ☐ No. Yrs. Former Address ☐ Own ☐ Rent ☐ (Complete if less than 2 years ago) (Complete if less than 2 years ago)

LN Originator NMLS

Name & Address of E	plicant Employer 🗌 Self I	Employed		this job	Name &		ess of Employ		o-Applic elf Employe	_	on this job
			this li	oloyed in ine of ofession	_					th	employed in is line of /profession
Position/Title/Type of	Business		Busines	s Phone	Position	/Title/	Type of Busin	ess		Busin	ess Phone
If employed in curren	t position for less	than tv	vo vears o	or if curre	ently empl	loved	in more than	one posi	tion, con	plete th	e followina
Name & Address of E										_	(from - to)
			Busines	s Phone						Busin	ess Phone
Position/Title/Type of	Business		Inco	Monthly ome	Position	/Title/	Type of Busin	ess		lı	s Monthly ncome
N. 0 A.I. 6 F			\$		Noma 9	۸۵۵۶	ooo of Employ	or 🗆 -		\$	15
Name & Address of E	:mployer ∐ Self	Employed	Dates (fi	rom - to)	Name &	Addi	ess of Employ	rer ∐ S∈	elf Employe	d Dates	(from - to)
			Busines	s Phone	1					Busin	ess Phone
Position/Title/Type of	Business		Inco	Monthly ome	Position	/Title/	Type of Busin	ess		lı	s Monthly ncome
	6 Monthly	noom	\$	`ombin	ad Haw	oine	Evnance	n form	otion	\$	
Gross Monthly Income	6. Monthly I		pplicant		stol .	Coml	bined Monthly ing Expense		Present	F	Proposed
Base Empl. Income*	\$	\$		\$		Rent		\$			
Overtime						First	Mortgage (P&	1)		\$	
Bonuses						Othe	r Financing (P8	kl)			
Commissions						Haza	rd Insurance				
Dividends/Interest						Real	Estate Taxes				
Net Rental Income							gage Insuranc	e			
Other (before completing, see							eowner Assn.				
the notice in "Describe Other Income," below)						Othe	r				
Total	\$	\$		\$		Tota	I	\$		\$	
* Self Employed App	licant(s) may be i	equired	to provide	e addition	al docum	entat	ion such as ta	x return	s and fina	ncial st	atements.
A/C Describe C	income	need no		aled if the	e Applica	nt (A)	ntenance) or Co-Applica ing this loan.	ant (C)	Mo	onthly A	mount
									\$		
			7. As	ssets al	nd Liab	ilitie	s				
This Statement and a their assets and liabili basis; otherwise, sep non-applicant spouse other person.	ities are sufficien arate Statements	tly joined and Scl	d so that i hedules ai	the State re require	ment can d. If the (be m Co-Ap	eaningfully an pplicant section must also be	d fairly 1 was co complet	presented ompleted ted about	l on a co about a that sp	ombined ouse or
Schedule of Real Esta	nte Owned. (If ad	ditional _l	properties	are own	ed, use co	ontinu		mpleted		, _	Not Jointly
Property Address (enter S if sold, PS if R if rental for income		Type Prope		esent et Value	Amoun Mortgag Liens	es &	Gross Rental Income	Mortga Paymer	ge Main	urance, tenance, s & Misc	Net Rental Income
		•	\$		\$		\$	\$	\$		\$
		Tota	ls \$		\$		\$	\$	\$		\$
List any additional na	mes under which	credit h	as previo	usly been	received	and	indicate appro	priate cr	editor na	me(s) ar	nd account
number(s): Alterr	nate Name			С	reditor Na	ame			Accou	nt Numb	oer

	7. Asset	ts and Liabilities (Continued)		
Assets	Cash or Market Value	Liabilities and Pledged Assets. List		
Description		account number for all outstanding del revolving charge accounts, real estate		
Cash deposit toward purchase neld by:	\$	pledges, etc. Use continuation sheet, i		
		liabilities, which will be satisfied upon		
		refinancing of the subject property.		
List checking and savings accou	ints helow	Liabilities	Monthly Payment & Months Left to Pay	Unpaid Balance
Name and address of Bank, S&I		Name and address of Company	\$ Payment/	\$
value and address of Bank, Oct	-, or ordan ornari	Traine and address of company	Months	Ť
Acct. no.	\$	Acct. no.	☐ Revolving	
Name and address of Bank, S&I	_, or Credit Union	Name and address of Company	\$ Payment/	\$
			Months	
				_
Acct. no.	\$	Acct. no.	☐ Revolving	
Name and address of Bank, S&I	_, or Credit Union	Name and address of Company	\$ Payment/	\$
			Months	
Acct. no.	\$	Acct. no.	☐ Revolving	1
Name and address of Bank, S&I		Name and address of Company	\$ Payment/	\$
, , , , , , , , , , , , , , , , , , , ,	,	,	Months	
				_
Acct. no.	\$	Acct. no.	Revolving	
Stocks & Bonds (Company	\$	Name and address of Company	\$ Payment/	\$
name/number & description)			Months	
		Acct. no.	☐ Revolving	_
Life Insurance net cash value	\$	Name and address of Company	\$ Payment/	\$
Face amount: \$	•	and and all and a company	Months	
Subtotal Liquid Assets	\$	1		
Real estate owned	\$			
(enter market value from				_
schedule of real estate owned)		Acct. no.	☐ Revolving	
		Name and address of Company	\$ Payment/	\$
Vested interest in retirement	\$		Months	
fund		_		
Net worth of business(es) owne (attach financial statement)	a ş			
attach imancial statement,		Acct. no.	□ Payalvina	-
Automobiles owned	\$	Alimony/Child Support/Separate	Revolving \$	//////////////////////////////////////
(make and year)	•	Maintenance Payments Owed to:		
		Job-Related Expense	\$	
		(child care, union dues, etc.)		
Other Assets (itemize)	\$			
		Total Manthly Daymants		
Other Assets		Total Monthly Payments Other Liabilities	\$ ////////////////////////////////////	V/////////////////////////////////////
Other Assets (from continuation page, if any)	\$	(from continuation page, if any)		\$
Total	\$	Net Worth	Total	\$
Assets (a)		(a - b)	Liabilities (b)	т
		8. Declarations		
		Co-Applicant		plicant Co-Applicant
a. Are there any outstanding judagainst you?	dgments Yes No	Yes No e. Have you directly or in	directly been	es No Yes No
against you? o. Have you been declared bank	rupt 🗆	obligated on any loan v	which resulted	
within the past 7 years?		in foreclosure, transfer of foreclosure, or judge	ment?	
 Have you had property foreclupon or given title or deed in 	iosed	f. Are you presently delir	nquent or in	
thereof in the last 7 years?		default on any Federal other loan, mortgage,		
d. Are you a party to a lawsuit?	,	obligation, bond, or loa	an quarantee?	

		8. <i>D</i>	eclar	ratioi	ns (Continued)				
	Appl	icant	Co-Ap	plicant		Appli	cant	Co-Ap	plicant
		No	Yes	No	m. Have you had an ownership interest	Yes	No	Yes	No
g. Are you obligated to pay alimony, child support, or separate maintenance?h. Is any part of the down payment					in a property in the last three years? (1) What type of property did you				
borrowed?					own principal residence (PR), second home (SH), or				
i. Are you a co-maker or endorser on a note?					investment property (IP)? (2) How did you hold title to the				
j. Are you a U.S. citizen?					home solely by yourself (S),				
k. Are you a permanent resident alien? I. Do you intend to occupy the property					jointly with your spouse (SP), or jointly with another person (O)?				
as your primary residence?					n. Are there any other equity loans on the property?				
9. C	onti	nua	tion a	and A	Additional Information				

Instructions. Use this section if you need more space to complete the Universal Credit Application. Mark "A" for Applicant and "C" for Co-Applicant. Use this space if you answered "Yes" to any of the questions in Section 8.

<u> 10. Federal</u> Notices

Important Applicant Information. To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who applies for a loan or opens an account.

What this means for you. When you apply for a loan or open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license and/or other identifying documents. In some instances, we may use outside sources to confirm the information. The information you provide is protected by our privacy policy and Federal law.

False Statements. By signing below, I/we fully understand that it is a Federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements concerning any of the above facts as applicable under the provisions of Title 18, United States Code, Section 1001, *et seq*.

11. State Notices

California Residents. Each applicant, if married, may apply for a separate account.

Massachusetts Residents. Under Massachusetts statute, Mass. Gen. L. ch. 184, Section 17B, you, the Applicant (and Co-Applicant) are entitled to know the following:

- 1. The responsibility of the attorney for the Mortgagee is to protect the interest of the Mortgagee.
- 2. Mortgagors may, at their own expense, engage an attorney of their own selection to represent their interests in the transaction.

For Home Equity Line of Credit. The current annual percentage rate for finance charges and, if the rate may vary, a statement to that effect and of the circumstances under which the rate may increase and whether there are any limitations on any such increase, as well as the effects of any such increase; the conditions under which a finance charge may be imposed, including the time period within which any credit extended may be repaid without incurring a finance charge; whether any annual fee is charged and the amount of any such fee; and whether any other charges or fees may be assessed, the purposes for which they are assessed, and the amounts of any such charges or fees.

New York Residents. A consumer report may be ordered in connection with your application. Upon your request, we will inform you whether or not a report was ordered. If a report was ordered, we will tell you the name and address of the consumer reporting agency that provided the report. Subsequent reports may be ordered or utilized in connection with an update, renewal or extension of credit for which you have applied.

Ohio Residents. The Ohio laws against discrimination require all creditors make credit equally available to all creditworthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law.

Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

Texas Residents. The owner of the homestead is not required to apply the proceeds of the extension of credit to repay another debt except debt secured by the homestead or debt to another lender.

Wisconsin Residents. Notice to Married Applicants. No provision of any marital property agreement, unilateral statement under Wisc. Statutes §766.59 or a court decree under Wisc. Statutes §766.70 adversely affects the interest of the lender unless the lender, prior to the time the credit is granted, is furnished a copy of the agreement, statement or decree or has actual knowledge of the adverse provision when the obligation to the lender is incurred.

For married Wisconsin Residents. The credit being applied for, if granted, will be incurred in the interest of my marriage or family. I understand the creditor may be required by law to give notice of this transaction to my spouse.

12. Acknowledgment 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;

12. Acknowledgment and Agreement (Continued)

(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 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 my original written signature.

Acknowledgment. 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 business purpose through any source, including a source named in this application or a consumer reporting agency.

Λ			^		
Applicant's Signature		Date	Co-Applicant'	s Signature	Dat
	Gove	rnment Monitoring	a or Demogra	aphic Informa	ation
Lender only: Indicate whether a Demographic Information form	a separat	te Regulation B (ECOA)	Government Mon	nitoring Information	on form, or a separate HMDA
☐ HMDA Demographic Inform☐ ECOA Government Monitor	nation <i>(if</i>	HMDA reportable)			
☐ Not applicable					
			- Outsing	_	
		For Mortgage			
This information In a face-				ephone interview	amiltad via a mail or the Interne
	Эрисанса	nd Submitted by lax of	IIIaii 🗀 by the c	1	omitted via e-mail or the Interne
Loan Originator's Signature			Date	Loan Originator	's Phone Number
X					
Loan Originator's Name		Loan Originator Identifie	er	Loan Origination	n Company's Address
t Otto Commencia N		0 1 1 -41 0	1.1 4!!!	_	
Loan Origination Company's Na CorTrust Bank, NA	ame	Loan Origination Comp. 405612	any Identifier		
Col I i dot Duini, I i I			rkaboot Oni	tional	
a. Purchase price		Transaction Wo		s closing costs pa	aid by Callar &
b. Alterations, improvements,	renairs		I. Other Cred		alu by Seliei 4
c. Land (if acquired separately)			1 1 2 2 2 2	, , , , , , , , , , , , , , , , , , , ,	
d. Refinance (include debts to	be paid o	off)] [
e. Estimated prepaid items			-	ınt (exclude PMI,	MIP,
f. Estimated closing costs			4 	ee financed)	
g. PMI, MIP, Funding Feeh. Discount (if Applicant will p	2011			Funding Fee final ant (add m & n)	nced
i. Total costs (add items a three			p. Cash from		
j. Subordinate financing	<u> </u>			, k, l & o from i)	
		For Len	der's Use		
Lender's Initial Lien Position	First Lie	en Holder's Name & Add	dress (if any)	Second Lien Ho	lder's Name & Address (if any)
☐ First Lien					
☐ Second Lien☐ Subordinate Lien					
	Loan No) .		Loan No.	
Date Application Received	Receive	d By		Amount Reques	sted
	<u> </u>				
Decision ☐ Approved ☐ Denied	Decision	ı Date		Decision By	
☐ Approved ☐ Denied HMDA Reportable	Amount	t Approved	Initial Advance (i	if applicable)	Funding Date
☐ Yes	Amount	. друготов	Illiniai Advance (.	ii uppiiousio,	Tunung Date
Refinancing	Rescind	able	Early Disclosures	s Given	High Cost Mortgage Yes
☐ Yes ☐ Cash Out	□ Y	'es	☐ Yes, on		High Priced Mortgage ☐ Yes

les this continuation	Borrower:	ontine	uation S	heet	For Loan A	pplication		Aganay	Case Numbe	
Use this continuation sheet if you need more space to complete the	Borrower:							Agency	Case Numbe	r:
Loan Application. Mark B for Borrower or C for Co-Borrower.	Co-Borrower:							Lender	Case Number	:
		Aa	lditional	Asse	ets and Liab	oilities				
Additional Schedule of Real Property Address (enter S if sol		l- ,	l 5		٠	1 0	1		Insurance,	1
sale or R if rental being held for		Type of Property	Prese Market \		Amount of Mortgages & Liens	Gross Rental Incom		ortgage ayments	Maintenance, Taxes & Misc.	Net Rental Income
			\$		\$	\$	\$		\$	\$
List checking and saving	a aggaunta halay	Totals	\$		\$ Liabilities	\$	\$		\$	\$
Name and address of Ba			nn		Name and a	ddress of (Compan	ıv		
Tanno ana adaroco or Ba	.m, 6a2, 61 6160	0	,,,		Traine and a	uu. 000 01 .	oompa.	• 7		
					Acct. no.					
Acct. no.		\$			Monthly Pay	ment &			,	
Name and address of Ba	nk. S&L. or Cred		on		Months Left		\$		1	
	, 00.2, 0. 0.00				Unpaid Bala		\$			
					Name and a	ddress of (Compar	ıy		
Acct. no.		\$			Acct. no.	. 0				
Name and address of Ba	nk, S&L, or Cred	lit Unio	on		Monthly Pay Months Left		\$		1	
					Unpaid Bala		\$			
					Name and a	ddress of (Compar	ıy		
Acct. no.		\$			Acct. no.					
Name and address of Ba	nk, S&L, or Cred	lit Unio	on		Monthly Pay		\$		/	
					Months Left Unpaid Bala		\$			
					Name and a			ıv		
						uu. 000 0	oopa.	.,		
Acct. no.		\$			A 4					
Stocks & Bonds (Compa name/number & descript		\$			Acct. no. Monthly Pay	ment &				
iamo/mambor & docompt					Months Left		\$		/	
					Unpaid Bala		\$			
					Name and a	ddress of (Compar	ıy		
					Acct. no.	0				
Life Insurance net cash v	/alue	\$			Monthly Pay Months Left		\$		/	
Face amount: \$					Unpaid Bala	-	\$			
Subtotal Liquid Assets Real estate owned (enter	r market value	\$			Name and a	ddress of (Compar	ıy		
from schedule of real est	tate owned)	\$			_					
Vested interest in retiren Net worth of business(e:		\$			_					
Net worth of business(es (attach financial stateme	nt)	\$			Acct. no.					
Automobiles owned (ma	ke and year)	\$			Monthly Pay Months Left		\$		/	
					Unpaid Bala	-	\$			
					Name and a		•	ıy		
Other Assets (itemize)		\$			=		1			
- , -,										
					Acct. no.					
					Monthly Pay		\$		/	
Total A	dditional Assets	\$			Months Left	•			,	
i otal A	aditional Assets	Ľ_			Unpaid Bala	nce	\$			

Continuation Sheet	t For Loan Application
	al Liabilities
Name and address of Company	Name and address of Company
Acct. no.	Acct. no.
Monthly Payment &	Monthly Payment &
Months Left to Pay	Months Left to Pay
Unpaid Balance \$	Unpaid Balance \$
Name and address of Company	Name and address of Company
,	, ,
Acct. no.	Acct. no.
Monthly Payment &	Monthly Payment &
Months Left to Pay	Months Left to Pay
Unpaid Balance \$	Unpaid Balance \$
Name and address of Company	Name and address of Company
Acet no	A cost inc
Acct. no.	Acct. no.
Monthly Payment & Months Left to Pay /	Monthly Payment & \$ / Months Left to Pay
Unpaid Balance \$	Unpaid Balance \$
Name and address of Company	Name and address of Company
Name and address of Company	Name and address of Company
Acct. no.	Acct. no.
Monthly Payment &	Monthly Payment &
Months Left to Pay	Months Left to Pay
Unpaid Balance \$	Unpaid Balance \$
Name and address of Company	Name and address of Company
,	, ,
Acct. no.	Acct. no.
Monthly Payment &	Monthly Payment &
Months Left to Pay	Months Left to Pay
Unpaid Balance \$	Unpaid Balance \$
Name and address of Company	Name and address of Company
Acct. no.	Acct. no.
Monthly Payment & Months Left to Pay /	Monthly Payment & \$ / Months Left to Pay
Unpaid Balance \$	Unpaid Balance \$
Name and address of Company	Name and address of Company
Name and address of Company	Name and address of Company
Acct. no.	Acct. no.
Monthly Payment &	Monthly Payment &
Months Left to Pay	Months Left to Pay
Unpaid Balance \$	Unpaid Balance \$
Name and address of Company	Name and address of Company
Acct. no.	Acct. no.
Monthly Payment &	Monthly Payment &
Months Left to Pay	Months Left to Pay
Unpaid Balance \$	Unpaid Balance \$
Total Additional Monthly Payments \$	Total Additional Liabilities \$
I/We fully understand that it is a Federal crime punishable by fine	or imprisonment, or both, to knowingly make any false statements
concerning any of the above facts as applicable under the prov Borrower's Signature: Date	Co-Borrower's Signature: Date
Date	Date
X	X

FEDERAL CREDIT APPLICATION INSURANCE DISCLOSURE

I have applied for an extension of credit with you. You are soliciting, offering, or selling me an insurance product or annuity in connection with this extension of credit. FEDERAL LAW PROHIBITS YOU FROM CONDITIONING THE EXTENSION OF CREDIT ON EITHER:

- 1. My purchase of an insurance product or annuity from you or from any of your affiliates; or
- 2. My agreement not to obtain, or a prohibition on me from obtaining, an insurance product or annuity from an unaffiliated entity.

By signing, I acknowledge that I have received a copy of this form on today's date or within three (3) days if I have applied by telephone. Unless this disclosure is provided electronically or I have applied for credit by mail, I also acknowledge that you have provided this disclosure to me orally.

		_	
		Date	
ndividually			
		Date	· ·
Individually			
authorized representative of nce Disclosures orally to the vledged orally by the Applican	Applicant(s) and t t(s). I also confirm	hat the receipt of the that I have mailed to th	e oral disclosure e Applicant(s) the
lephone Applications Only: authorized representative of nee Disclosures orally to the vledged orally by the Applicant Application Insurance Disclosurtion is taken, excluding Sunda	Applicant(s) and to t(s). I also confirm to tree (3)	hat the receipt of the that I have mailed to the days beginning the firs	e oral disclosure e Applicant(s) the
authorized representative of nce Disclosures orally to the vledged orally by the Applican	Applicant(s) and to t(s). I also confirm to tree (3)	hat the receipt of the that I have mailed to the days beginning the firs	e oral disclosure e Applicant(s) the
authorized representative of nce Disclosures orally to the vledged orally by the Applican Application Insurance Disclosu	Applicant(s) and to t(s). I also confirm to tree (3)	hat the receipt of the that I have mailed to the days beginning the firs	e oral disclosure e Applicant(s) the
authorized representative of nce Disclosures orally to the vledged orally by the Applican Application Insurance Disclosu tion is taken, excluding Sunda	Applicant(s) and to t(s). I also confirm to tree (3)	that the receipt of the that I have mailed to the days beginning the firs holidays.	e oral disclosure e Applicant(s) the
authorized representative of nce Disclosures orally to the vledged orally by the Applican Application Insurance Disclosu tion is taken, excluding Sunda	Applicant(s) and to t(s). I also confirm to tree (3)	hat the receipt of the that I have mailed to the days beginning the firs	e oral disclosure e Applicant(s) the
authorized representative of nce Disclosures orally to the vledged orally by the Applican Application Insurance Disclosu tion is taken, excluding Sunda	Applicant(s) and to t(s). I also confirm to tree (3)	that the receipt of the that I have mailed to the days beginning the firs holidays.	e oral disclosure e Applicant(s) the
authorized representative of nce Disclosures orally to the vledged orally by the Applican Application Insurance Disclosu	Applicant(s) and to t(s). I also confirm to tree (3)	that the receipt of the that I have mailed to the days beginning the firs holidays.	e oral disclosure e Applicant(s) the

NOTICE OF YOUR RIGHT TO RECEIVE A COPY THE APPRAISAL

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.

AFFILIATED BUSINESS ARRANGEMENT DISCLOSURE STATEMENT

OATE AND PARTIES. The date of this	s Affiliated Business Arrangement Disclos	ure Statement is The parti	es and their addresses are:
APPLICANT:			
REFERRING PARTY:			
roperty:			
	Bank NA has a business relationship wi	th the Provider(s) named below. This bu	siness relationship can be described as
orInsurance		CorInsurance is owned 100% through co	ommon ownership.
	may provide Referring Party a financial or	-41 h 64	
an on the subject property. THERE ARE	for the settlement services listed. You at FREQUENTLY OTHER SETTLEMENT SE YOU ARE RECEIVING THE BEST SERVICES	RVICE PROVIDERS AVAILABLE WITH S	SIMILAR SERVICES. YOU ARE FREE TO
			CLS.
HUD Line No.	Service	Provider	Charge
		Provider	Charge
CKNOWLEDGMENT. I/we have rea	nd this disclosure form, and understand that	Provider	Charge
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Affiliated Business Arrangement Disclosure Statement SD/4SDETHLEU000000000000675054081414N