



1752 Lincoln Avenue San Rafael, CA 94901
 Phone: 415-257-2100 Fax: 415-592-3488 Web Site: www.costelloandsons.com

**MORTGAGE BROKER SUPPLEMENT
 REAL ESTATE AGENTS ERRORS & OMISSIONS LIABILITY**

A. PROPOSED APPLICANT

Name of Applicant: _____

Mailing Address, City & State: _____

Phone: _____ Fax: _____ Email: _____

B. PROFESSIONAL SERVICE ACTIVITIES AND SPECIALTY

1. a. 1-4 Family Mortgage Broker Activities: Provide fiscal year gross revenue information

	Category	Transactions Past Yr	Revenue Past Yr	Projected Current Yr	Transactions Current Yr
i.	Mortgage Origination	#	\$	\$	#
ii.	Mortgage Consulting/Counseling (incl Loan Mod)	#	\$	\$	#
iii.	Other, Describe: _____	#	\$	\$	#
iv.	Other, Describe: _____	#	\$	\$	#
	TOTALS		\$	\$	

b. 1-4 Family Loan Origination Mix of Business: Estimated mix of by # transactions and \$ loan volume

	Category	# Transactions Past Yr	\$ Loan Volume Past Yr	# Transactions Current Yr	\$ Loan Volume Current Yr
i.	Fannie/Freddie Compliant	%	%	%	%
ii.	Jumbo	%	%	%	%
iii.	FHA/HUD	%	%	%	%
iv.	Fixed Rate	%	%	%	%
v.	ARM	%	%	%	%
vi.	Refinance	%	%	%	%
vii.	Home Equity Loan (HELOC)	%	%	%	%
viii.	ALT-A & A-	%	%	%	%
ix.	B Subprime	%	%	%	%
x.	All Other Subprime	%	%	%	%
xi.	Interest Only	%	%	%	%
xii.	Reverse	%	%	%	%
xiii.	>100% Loan To Value	%	%	%	%

c. 1-4 Family Loan Origination Size: Average and maximum value past fiscal year:

(a) Average Value: \$ _____ (b) Maximum Value: \$ _____

2. Non-Residential Mortgage Loan Origination Activities: Provide fiscal year gross revenue information

	Category	Transactions Past Yr	Loan Volume Past Yr	Transactions Current Yr	Loan Volume Current Yr
a	Multi-Family	#	\$	#	\$

MORTGAGE BROKER SUPPLEMENT

b	All Other Commercial	#	\$	#	\$
	TOTALSs	#	\$	#	\$

3. List the following information for key mortgage operation professionals (Use Attachment to this Application if necessary):

Name	Title	Active Licenses, Certifications or Professional Designations	Year First Licensed	License Ever Revoked or Suspended?
				<input type="checkbox"/> Yes, <input type="checkbox"/> No
				<input type="checkbox"/> Yes, <input type="checkbox"/> No
				<input type="checkbox"/> Yes, <input type="checkbox"/> No

4. a. Does the Applicant have a warehouse line of credit? Yes * No
 * **If yes**, what size? \$ _____ & # years with same lender: # _____
- b. Does the Applicant use regulatory compliance software (such as ComplianceEase)? Yes * No
 * **If yes**, list system used: _____
- c. Does the Applicant have any written or oral agreements or understandings with any other company that involves the referral of business to or from the Applicant and/or is the Applicant a party to an "Affiliated Business Arrangement as defined by RESPA? Yes * No
 * **If yes**, advise by attachment to this Application: Information Attached
 i. Who they are and explain the nature and extent.
 ii. Whether the relationships between the companies are disclosed to the individuals involved in the transactions involving these referrals (such as whether "Affiliated Business Arrangement Disclosure Statements are used).
 iii. If any such written agreements and/or any such disclosures have been reviewed by an attorney.
- d. Has the Applicant had to repurchase any loan(s) in the past 3 years? Yes No
- e. Has the Applicant ever been rejected for application with an Investor/Lender or had a correspondent relationship terminated with an Investor/Lender? Yes * No
 * **If yes**, explain: _____

- f. Has the Applicant ever been reprimanded, disciplined or fined by any government agency, regulatory authority, investor group, warehouse lender, wholesaler, or the Department of Housing Urban Development? Yes * No
 * **If yes**, explain: _____

PLEASE READ CAREFULLY

I understand that the information submitted herein becomes a part of the Applicant Firm's Real Estate Agents Errors & Omissions Liability Proposal Form and is subject to the same representations and conditions.

Dated

Signature of Owner, Partner, Officer or Principal

Title

Owner, Partner, Officer or Principal (Print Name)