

APPLICANT CREDIT INFORMATION: If this is an INDIVIDUAL application, complete section A. If this is a JOINT application, complete section A&B. ***SEE ATTACHMENT FOR ADDITIONAL INFORMATION.** Please advise whether credit references and/or credit history should be investigated under another name. It is a crime to intentionally falsify information on this application. 8-14-2014

| | | |
|--------------------------|---------------------|--|
| Application Date: | Seller Name: | Purchase Agreement with Seller must be attached |
|--------------------------|---------------------|--|

Property will be: Primary Residence

Purpose of the Loan: Purchase home only *

Proposed Down Payment: \$ _____ **Source of Down Payment:** Savings Checking Cash on Hand Loan

Gift. If gift, from whom: _____ Other (Explain): _____

A minimum of 5% is required. A down payment greater than 5% increases the likelihood of approval and may result in a lower interest rate.

Street Address where home will be located: _____ **Site #** _____

City: _____ **State:** _____ **Zip:** _____ **County:** _____

Site of Placement: Leased Community

Information on the Land Lease Community, Land Owner Name, Tribe name if home is to be placed on a Reservation, or the mortgage holder:
Name: _____ **Phone Number:** _____ **Monthly Site Payment \$** _____

Is the site rent scheduled to increase over the next four years? If so, please explain. _____

EMAIL ADDRESS: REQUIRED (for Loan Notices and Documents)

APPLICANT EMAIL ADDRESS:

CO-APPLICANT EMAIL ADDRESS:

| (A) APPLICANT | | (B) CO-APPLICANT | |
|--|---|--|---|
| FULL NAME - Last, First, Middle | | FULL NAME - Last, First, Middle | |
| Birth Date (mm/dd/yy): | Social Security #: | Birth Date (mm/dd/yy): | Social Security #: |
| Sex: (Optional) <input type="checkbox"/> Male <input type="checkbox"/> Female | Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated | Sex: (Optional) <input type="checkbox"/> Male <input type="checkbox"/> Female | Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated |
| # Dependents: | Ages: | # Dependents: | Ages: |

| APPLICANT'S RESIDENCE | | | CO-APPLICANT'S RESIDENCE | | |
|--|--|-------------------|--|--|-------------------|
| Current Street Address (3 Years Residence Required, attach supplement if needed) | | | Current Street Address (3 Years Residence Required, attach supplement if needed) | | |
| City, State, Zip: | | County: | City, State, Zip: | | County: |
| Mailing Address (if different from physical) | Home Phone | Cell Phone | Mailing Address (if different from physical) | Home Phone | Cell Phone |
| How long at present address? Yrs Mo | <input type="checkbox"/> Homeowner * <input type="checkbox"/> Other <input type="checkbox"/> Renter <input type="checkbox"/> Parent | Mo. Mrtg/Rent: | How long at present address? Yrs Mo | <input type="checkbox"/> Homeowner * <input type="checkbox"/> Other <input type="checkbox"/> Renter <input type="checkbox"/> Parent | Mo. Mrtg/Rent: |
| Name of Mortgage Holder or Landlord: | | Telephone number: | Name of Mortgage Holder or Landlord: | | Telephone number: |
| *If homeowner, what do you intend to do with the existing home? | | | *If homeowner, what do you intend to do with the existing home? | | |
| Previous address (if current address is less than 3 years) | | | Previous address (if current address is less than 3 years) | | |
| City, State, Zip: | | How long? | City, State, Zip: | | How long? |
| Name of Mortgage Holder or Landlord: | | | Name of Mortgage Holder or Landlord: | | |
| Telephone number: | | | Telephone number: | | |
| Name of nearest Relative NOT living with you: | | Relationship: | Name of nearest Relative NOT living with you: | | Relationship: |
| | | Phone: | | | Phone: |

APPLICANT'S EMPLOYMENT HISTORY (Minimum Three Years, attach supplement if needed)

| | | |
|---------------------|--|----------------|
| 1-Current Employer: | Position Held/Occupation: Self Employed: <input type="checkbox"/> Yes <input type="checkbox"/> No | Date Started: |
| City, State: | Supervisor Name and Telephone Number: | Email address: |

What is your base pay rate excluding commission, bonuses, and overtime:

How are you paid? Hourly rate: \$ _____ Weekly Salary :\$ _____ BiWeekly Salary: \$ _____ Monthly Salary: \$ _____

Do you receive bonuses? _____ How often? _____ How much in bonuses over the last 12 months \$ _____

Do you receive commission? _____ How often? _____ How much in commission over the last 12 months \$ _____

Do you consistently receive overtime? _____ How often? _____ How much in overtime over the last 12 months \$ _____

| | | | |
|--------------------------------|--|---------------|------------|
| 2-Second or Previous Employer: | Position Held/Occupation: Self Employed: <input type="checkbox"/> Yes <input type="checkbox"/> No | Date Started: | Date Left: |
| City, State: | Supervisor Name and Telephone Number: | Income: | |

| | | | |
|----------------------|--|---------------|------------|
| 3-Previous Employer: | Position Held/Occupation: Self Employed: <input type="checkbox"/> Yes <input type="checkbox"/> No | Date Started: | Date Left: |
| City, State: | Supervisor Name and Telephone Number: | Income: | |

Please provide an explanation for any job gaps greater than 30 days.

CO-APPLICANT'S EMPLOYMENT HISTORY (Minimum Three Years)

| | | |
|---------------------|--|----------------|
| 1-Current Employer: | Position Held/Occupation: Self Employed: <input type="checkbox"/> Yes <input type="checkbox"/> No | Date Started: |
| City, State: | Supervisor Name and Telephone Number: | Email address: |

What is your base pay rate excluding commission, bonuses, and overtime:

How are you paid? Hourly rate: \$ _____ Weekly Salary :\$ _____ BiWeekly Salary: \$ _____ Monthly Salary: \$ _____

Do you receive bonuses? _____ How often? _____ How much in bonuses over the last 12 months \$ _____

Do you receive commission? _____ How often? _____ How much in commission over the last 12 months \$ _____

Do you consistently receive overtime? _____ How often? _____ How much in overtime over the last 12 months \$ _____

| | | | |
|---------------------------------|--|---------------|------------|
| 2- Second or Previous Employer: | Position Held/Occupation: Self Employed: <input type="checkbox"/> Yes <input type="checkbox"/> No | Date Started: | Date Left: |
| City, State: | Supervisor Name and Telephone Number: | Income: | |

| | | | |
|----------------------|--|---------------|------------|
| 3-Previous Employer: | Position Held/Occupation: Self Employed: <input type="checkbox"/> Yes <input type="checkbox"/> No | Date Started: | Date Left: |
| City, State: | Supervisor Name and Telephone Number: | Income: | |

Please provide an explanation for any job gaps greater than 30 days.

APPLICANT'S OTHER INCOME

CO-APPLICANT'S OTHER INCOME

Income from SSI, retirement, disability, alimony, child support or separate maintenance agreement need not be disclosed if you do not wish to have it considered as a basis for undertaking or repaying this debt.

| | | | |
|---------------------------------|------------------------|---------------------------------|------------------------|
| Child Support Monthly Amount | Ages of Children | Child Support Monthly Amount | Ages of Children |
| Alimony or Separate Maintenance | Duration | Alimony or Separate Maintenance | Duration |
| Other Source: | How Long: Monthly Amt: | Other Source: | How Long: Monthly Amt: |

ASSET AND CREDIT INFORMATION

| | | | |
|--|-----------|---------------|----------------------------|
| Applicant Bank Name: | City, St: | Account type: | Balance: \$ |
| Co-Applicant Bank Name: | City, St: | Account type: | Balance: \$ |
| Retirement/401K with: | City, St: | Account type: | Balance: \$ |
| Auto #1: Yr/Make | Value: \$ | Lender: | Payment: \$ Balance: \$ |
| Auto #2: Yr/Make | Value: \$ | Lender: | Payment: \$ Balance: \$ |
| Other Asset: | Value: \$ | Lender: | Payment: \$ Balance: \$ |
| Other Real Estate Owned | Value: \$ | Lender: | Payment: \$ Balance: \$ |
| Other Real Estate Owned | Value: \$ | Lender: | Payment: \$ Balance: \$ |
| Are you a co-maker or guarantor on a note? | | | |
| If Yes, for whom? | | Creditor | Monthly Payment: \$ |

| (A) APPLICANT - Debts / Obligations | (B) CO-APPLICANT - Debts / Obligations |
|-------------------------------------|--|
| Expiration Date | Expiration Date |
| Alimony/Maintenance: \$ | Alimony/Maintenance: \$ |
| Garnishment: \$ | Garnishment: \$ |
| List Ages of Children | List Ages of Children |
| Child Support: \$ | Child Support: |

| Other Extraordinary Recurring Expenses | |
|---|--------------------------|
| List Items that have a significant impact to your budget | Estimated Monthly Amount |
| If you drive more than 20 miles each way to work every day, what is your monthly fuel and maintenance expense other than your car payment? | \$ |
| Child Care Expense: | \$ |
| Other: | \$ |
| Other: | \$ |
| List any Government Assistance Payments to you that help offset household expenses, such as WIC, TANF, or SNAP. You are not required to disclose these amounts if you do not wish to have them considered as a basis in analyzing your ability to undertake or repay this debt. | |
| | \$ |

| QUESTIONS | | |
|--|---|---|
| If the answer is "yes" to any of the questions (2-5), explain on attached sheet. Enter Y (yes) or N (no) for Borrower and/or Co-Borrower | Borrower | Co-Borrower |
| 1. Are you a U.S. Citizen? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 2. Are you a permanent resident alien? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 3. Have you declared bankruptcy within the last 10 years? If yes, when did you file? | <input type="checkbox"/> Yes <input type="checkbox"/> No Date: | <input type="checkbox"/> Yes <input type="checkbox"/> No Date: |
| 4. Have you had any judgments, repossessions, garnishments, or other legal proceedings filed against you in the past 7 years? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 5. Do you have any past due obligations to or insured by any agency of the Federal Government? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |

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 the 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 discriminate neither on the basis of this information nor 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 or surname. If you do not wish to furnish the information, please check the box below. (Lender must review the above material to assure 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 decline to furnish this information | CO-BORROWER: <input type="checkbox"/> I decline 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 Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> White <input type="checkbox"/> Native Hawaiian or Other Pacific Islander | Race: <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> White <input type="checkbox"/> Native Hawaiian or Other Pacific Islander |
| Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female | Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female |

NON-APPLICANT SPOUSE WAIVER OF NOTICE: I agree to waive notice of any extension of credit in connection with this application:

Non-applicant Spouse: _____ Date _____

These documents are separate from this application and must be submitted with the application for the lender to process your request.

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 the information contained in the 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 provision of Title 18, United States Code, Sec. 1001, et seq.; (2) *OMIT; (3) the property will not be used for any illegal or prohibited purpose or use; (4) *OMIT; (5) the property will be occupied as indicated herein; (6) any owner or servicer of the Loan may verify or re-verify any information contained in the application from any source named in the application, and Lender, its successors or assigns may retain the original and/or electronic record of the application, even if the Loan is not approved; (7) the Lenders 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 the application if any of the material facts that I have represented herein should change prior to the closing of the Loan; (8) in the event my payments on the Loan become delinquent, the owner or servicer of the Loan 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, expressed or implied, to me regarding the property or the condition or value of the property; and (11) my transmission of the 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 the application containing a facsimile of my signature, shall be as effective, enforceable and valid as if a paper version of the application were delivered containing my original signature. I give permission to Lender to investigate my credit and employment history and authorize my employer, landlord, depository institution, and credit company to release information about me. I acknowledge that my dealer is neither a broker nor a credit grantor. This application may be considered withdrawn if I do not inquire about its status within 30 days of the date of this notice. *

| | | | |
|---------------------------|-------------|------------------------------|-------------|
| _____ | _____ | _____ | _____ |
| Borrower Signature | Date | Co-Borrower Signature | Date |

*SEE ATTACHMENT FOR ADDITIONAL INFORMATION

NMLS #: 316902