



LOANSTREAM CORRESPONDENT APPLICATION PACKAGE - CHECKLIST

Please thoroughly complete this LoanStream Correspondent Application Package and provide the items listed below.

LoanStream Correspondent Approval Application

- 1 Thoroughly completed LoanStream Correspondent Approval Application signed by principal officer or owner of > 10% of the Company
- 2 Company overview or brief corporate narrative/history (only required if < 1 year of correspondent company experience)
- 3 Articles of Incorporation, LLC, or Partnership Resolution, including any DBA filings and Amendments
- 4 Resumé of Principal Officer(s)
- 5 Most recent quarterly unaudited financial statements (Balance Sheet and Profit & Loss) and previous two years of audited financial statement
- 6 IRS Request for Taxpayer Identification Number and Certification ([Form W-9](#)) signed by principal officer
- 7 Affiliated Business Arrangement (ABA) Disclosure, if applicable
- 8 Errors and Omissions (E&O) Insurance/Fidelity Bond full policy with minimum \$300,000 coverage
- 9 Warehouse Lender Approval Letter
- 10 Sample Bailee Letter
- 11 Company Organizational Chart
- 12 Copy of Company's "Goodbye" letter

Delegated Underwriting Consideration

- 13 Conforming Conventional Loans require proof of \$1 MM Minimum Net Worth, plus:
 - Post-closing QC Policies
 - Most recent three (3) months' QC Reports
 - Underwriting Manager's Resumé
- 14 Jumbo/NanQ Loans require proof of \$5 MM Minimum Net Worth, plus:
 - Conforming Conventional Delegated Underwriting
 - Jumbo/NanQ Underwriting Manager's Resumé

Third-Party Origination (TPO) Consideration

- 15 Proof that Minimum Net Worth threshold is met as follows:
 - Delegated Correspondent TPO = \$10 MM
 - Non-Delegated Correspondent TPO = \$5 MM
 - Wholesale TPO = \$2.5 MM
- 16 Copy of Seller's Approval Requirements
- 17 Copy of Seller's QC Requirements

LoanStream Mortgage will review the application package and verify the information provided. Any missing or incomplete information may result in delays.



LOANSTREAM CORRESPONDENT APPROVAL APPLICATION

A. COMPANY OVERVIEW

Legal Company Name _____

Company DBA(s) _____

Tax ID # _____ Website _____

Primary Address _____

Primary City, State, Zip _____

Primary Contact Name _____ Title _____

Contact Phone _____ Email _____

Date Organized/Incorporated _____ NMLS ID _____

Date Company Began Correspondent Lending _____

Loan Origination System: _____ Pricing Engine Used: _____

MERS Originator ID _____ Licensed States _____

Form of Organization Corporation Sole Proprietor Limited Liability Company
(Check One) Bank Charter Partnership Limited Liability Partners

Parent Company Name (if applicable) _____

Number of Full-time Employees (excluding MLOs) _____ # of Mortgage Loan Originators (MLOs) _____

Number of Branches (in addition to Company) _____

Loan Production Summary

Production Channel	Percent of Overall Production
Retail	_____ %
TPO – Wholesale	_____ %
TPO – Correspondent	_____ %

Agency Approvals (Please mark all that apply and provide Company’s Agency ID for each.)

Fannie Mae Seller/Servicer _____ FHA/HUD Approved _____

Freddie Mac Seller/Servicer _____ Ginnie Mae Seller/Servicer _____

USDA/Rural Housing Service _____ US Dept of Veterans Affairs (VA) _____

Company Officers (Please provide Name, Title, and Business Phone for each Company Officer.)

Officer Name	Position/Title	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

B. COMPANY CONTACTS

General Contact _____
 Phone _____ Email _____

Secondary/Pricing Contact _____
 Phone _____ Email _____

Underwriting Contact _____
 Phone _____ Email _____

Billing Contact _____
 Phone _____ Email _____

Post-Closing _____
 Phone _____ Email _____

Final Docs Contact _____
 Phone _____ Email _____

Compliance Contact _____
 Phone _____ Email _____

First Payments Contact _____
 Phone _____ Email _____

Recertification Contact _____
 Phone _____ Email _____

Website Security Admin 1 _____
 Phone _____ Email _____

Website Security Admin 2 _____
 Phone _____ Email _____

C. LOAN PRODUCTION BREAKDOWN

Product Type	Prior Year _____		Current YTD to _____		Projected to _____		Serviced Volume
	Loan Count	\$ Volume (in Millions)	Loan Count	\$ Volume (in Millions)	Loan Count	\$ Volume (in Millions)	\$ Volume (in Millions)
Fannie/Freddie		\$		\$		\$	\$
FHA/VA/USDA		\$		\$		\$	\$
Non-QM		\$		\$		\$	\$
Jumbo Prime		\$		\$		\$	\$
HELOCs/2nds		\$		\$		\$	\$
(Other)		\$		\$		\$	\$

D. WAREHOUSE LENDERS

Please list all current warehouse providers (attach a separate sheet if necessary) and attach wire instructions for each.

Warehouse Lender 1 _____ Contact _____
 Phone _____ Email _____
 Credit Line \$ _____ Non-QM Allowed Yes No Credit Line Captive Yes No

Warehouse Lender 2 _____ Contact _____
 Phone _____ Email _____
 Credit Line \$ _____ Non-QM Allowed Yes No Credit Line Captive Yes No

Warehouse Lender 3 _____ Contact _____
 Phone _____ Email _____
 Credit Line \$ _____ Non-QM Allowed Yes No Credit Line Captive Yes No

Warehouse Lender 4 _____ Contact _____
 Phone _____ Email _____
 Credit Line \$ _____ Non-QM Allowed Yes No Credit Line Captive Yes No

Warehouse Lender 5 _____ Contact _____
 Phone _____ Email _____
 Credit Line \$ _____ Non-QM Allowed Yes No Credit Line Captive Yes No

E. INVESTORS

Please list primary investors/lenders to which you have sold or brokered loans in the last 12 months

Investor 1 _____ Contact _____
 Relationship Correspondent Wholesale Both Phone _____
 Product Types _____ % of Total Volume _____ Delegated UW Yes No

Investor 2 _____ Contact _____
 Relationship Correspondent Wholesale Both Phone _____
 Product Types _____ % of Total Volume _____ Delegated UW Yes No

Investor 3 _____ Contact _____
 Relationship Correspondent Wholesale Both Phone _____
 Product Types _____ % of Total Volume _____ Delegated UW Yes No

Investor 4 _____ Contact _____
 Relationship Correspondent Wholesale Both Phone _____
 Product Types _____ % of Total Volume _____ Delegated UW Yes No

Investor 5 _____ Contact _____
 Relationship Correspondent Wholesale Both Phone _____
 Product Types _____ % of Total Volume _____ Delegated UW Yes No



F. ERRORS AND OMISSIONS (E&O) INSURANCE/FIDELITY BOND

Please provide the insurance carrier(s) for Company’s E&O coverage and Fidelity Bond.

E&O Insurance Provider _____ Limit per Incident \$ _____

Issuing Agency _____ Agent _____ Phone _____

Fidelity Bond Provider _____ Limit per Incident \$ _____

Issuing Agency _____ Agent _____ Phone _____

G. AUTHORIZATIONS AND CERTIFICATIONS

By signing this application, you agree that LoanStream Mortgage (“LSM”) may, at its discretion, provide information to you and/or your Company via fax, telephone, and/or email using the phone numbers and email addresses provided herein (or to other telephone, fax, and email addresses as provided by you from time to time) and/or by courier, US Mail, the Internet, computer, and/or other means. You agree to provide updated fax, telephone, and email addresses to LSM. Information provided may pertain to pricing, rates, available programs, specials, and other topics to keep you abreast of product opportunities and changes in the marketplace and/or how LSM conducts business. You also agree to provide LSM with annual Recertification through LSM or its designated vendor.

This authorization may only be rescinded in writing to:

Client Approval Department
OCMBC, Inc. dba LoanStream Mortgage
19000 MacArthur Blvd., Suite 200
Irvine, CA 92612

The undersigned Applicant declares that the information contained in this application and all accompanying supporting documentation is true and authentic to the best of their knowledge and belief. Applicant understands that LSM is relying on said information in making its business decision to approve Applicant. LSM and/or its affiliates are hereby authorized to obtain verification of the information from any source, including credit checks, reference inquiries, and background checks of the Applicant, its Principals, and Owners, in connection with this LoanStream Correspondent Approval Application. A photographic copy of this authorization may be used as a duplicate original. LSM will treat the information obtained as confidential.

Printed Name

Title

Signature

Date

H. OWNER AUTHORIZATIONS AND CERTIFICATIONS

Please complete all fields below; this section must be executed by all owners with 10% or more ownership.

I HAVE AT LEAST 10% OWNERSHIP INTEREST IN THE COMPANY AND CERTIFY THE FOLLOWING:

I certify that I am duly authorized to complete this application and grant consent on behalf of the Company named herein for the purposes of establishing and maintaining a business relationship with LoanStream Mortgage (“LSM”). I certify that all information contained in this application is true and correct in all respects. By signing below, I hereby give LSM authorization to obtain and/or verify information, including a credit report for the Company and all executive officers and/or owners from any source during this application process and semi-annually thereafter. LSM is also authorized to submit the name of the Company and all employees of the Company at any time for screening through any mortgage industry background database. The undersigned hereby releases, discharges, and exonerates any person or entity providing information to LoanStream in connection with this application and any recipient of such information, including LSM or its representatives, from any and all liability of every nature and kind arising from or in connection with the furnishing, receipt, and review of such information.

Owner 1 - Name	_____	% Owned	_____
Company Title	_____	Phone	_____
Residential Address	_____	SSN	_____
City, State, & Zip	_____	Birthdate	_____
_____ Signature		_____ Date	

Owner 2 - Name	_____	% Owned	_____
Company Title	_____	Phone	_____
Residential Address	_____	SSN	_____
City, State, & Zip	_____	Birthdate	_____
_____ Signature		_____ Date	

Owner 3 - Name	_____	% Owned	_____
Company Title	_____	Phone	_____
Residential Address	_____	SSN	_____
City, State, & Zip	_____	Birthdate	_____
_____ Signature		_____ Date	

Owner 4 - Name	_____	% Owned	_____
Company Title	_____	Phone	_____
Residential Address	_____	SSN	_____
City, State, & Zip	_____	Birthdate	_____
_____ Signature		_____ Date	

I. DISCLOSURE / DUE DILIGENCE

For any question answered 'Yes' below, please submit written documentation for the original finding and response or a letter of explanation.

	Yes	No
Company History Questionnaire		
1 Has your Company ever been suspended by any Investor from selling or servicing mortgages?	<input type="checkbox"/>	<input type="checkbox"/>
2 Has your Company and/or its principals or corporate officers been named as a defendant in a lawsuit for alleged fraud or misrepresentation?	<input type="checkbox"/>	<input type="checkbox"/>
3 Has your Company ever been involved in, or is your Company currently involved in litigation?	<input type="checkbox"/>	<input type="checkbox"/>
4 Has your Company and/or its principals or corporate officers filed for protection from creditors under provision of the bankruptcy laws within the past seven years?	<input type="checkbox"/>	<input type="checkbox"/>
5 Has your Company and/or its principals or corporate officers ever had a real estate or other professional license suspended, revoked, or received any other disciplinary action from a regulatory agency?	<input type="checkbox"/>	<input type="checkbox"/>
6 Have any of your principals and or any person named on this application (employed by your Company) ever been convicted of a crime or are now named as a defendant in any current criminal proceeding?	<input type="checkbox"/>	<input type="checkbox"/>
7 Has your Company ever entered into a supervisory agreement with any regulatory agency?	<input type="checkbox"/>	<input type="checkbox"/>
8 Has any lender enforced or attempted to enforce the Hold Harmless or Repurchase clause with your Company and/or any principals or officers?	<input type="checkbox"/>	<input type="checkbox"/>
9 Does any principal, owner, or employee of your Company have any affiliated or familial relationship with a LoanStream Mortgage employee?	<input type="checkbox"/>	<input type="checkbox"/>
10 Has your Company had any unfavorable findings with regard to mortgage operations/activities, including but not limited to any audit, examination, or report by Fannie Mae, Freddie Mac, Ginnie Mae, HUD, OTS, VA, or any other federal or state regulatory/investigatory agency?	<input type="checkbox"/>	<input type="checkbox"/>
11 Does your Company currently have any outstanding repurchase demands with investors?	<input type="checkbox"/>	<input type="checkbox"/>

For any question answered 'No' below, please submit a written letter of explanation.

	Yes	No
Company Compliance Questionnaire		
12 Does your Company comply with the capital requirements of each state and federal agency with jurisdiction over your lending practices?	<input type="checkbox"/>	<input type="checkbox"/>
13 Does your Company comply and conform to Fannie Mae/Freddie Mac Responsible Lending and Anti-predatory Lending Guidelines?	<input type="checkbox"/>	<input type="checkbox"/>
14 Does your Company comply with Appraiser Independence requirements?	<input type="checkbox"/>	<input type="checkbox"/>
15 Does your Company comply with the Patriot Act?	<input type="checkbox"/>	<input type="checkbox"/>
16 Does your Company comply with the Gramm-Leach-Bliley Act?	<input type="checkbox"/>	<input type="checkbox"/>
17 Does your Company have procedures for checking all employees against the US General Services Administration (GSA) Excluded Parties list, HUD Limited Denial of Participation (LDP) list, or any other government or public exclusionary list?	<input type="checkbox"/>	<input type="checkbox"/>
18 Does your Company comply and conform to Fannie Mae/Freddie Mac quality control guidelines?	<input type="checkbox"/>	<input type="checkbox"/>
19 Does your Company maintain a Business Continuity Plan (BCP)?	<input type="checkbox"/>	<input type="checkbox"/>

I have read all above Due Diligence statements and certify the responses to them are true and correct.

Signature _____ Date _____

J. AFFILIATE RELATIONSHIPS

Does your Company have any affiliation with any of the following entities? (Affiliation is defined as having ownership in, partnership interest with, or family or other close personal relationship.) Yes No
 Accounting or Tax Preparation Company, Appraisal Management Company or Appraiser, Building Contractor or Developer, Credit Bureau Service, Escrow Company, Property Management Company, Realty Company, or Title Company

If 'Yes,' please complete the fields below to disclose those relationships.

1. If your Company has an affiliation with any of the above-mentioned companies, please list them here:

Entity 1 - Name _____ Phone _____
 Business Address _____
 City, State, & Zip _____

Entity 2 - Name _____ Phone _____
 Business Address _____
 City, State, & Zip _____

Entity 3 - Name _____ Phone _____
 Business Address _____
 City, State, & Zip _____

Entity 4 - Name _____ Phone _____
 Business Address _____
 City, State, & Zip _____

Entity 5 - Name _____ Phone _____
 Business Address _____
 City, State, & Zip _____

2. If you are affiliated with a Closing Agent or Escrow Company, please also provide the following:
- a. A copy of your Quality Control Plan to assure no conflict of interest due to your affiliated business arrangement.
 - b. Proof of Errors and Omissions (E&O) insurance policy in the affiliated Closing Agent/Escrow Company's name with minimum coverage of \$1,000,000.

I certify the above information is true and correct.

 Printed Name _____
 Title

 Signature _____
 Date



K. CORPORATE RESOLUTION

I hereby certify that I am the Secretary of _____, a Corporation of the State of _____, and that as Secretary I have custody of the records of this Corporation, and by virtue of such action, the Board of Directors passed the following resolution at a meeting dated _____, which is now in force and is not in conflict with the Charter or Bylaws of the Corporation.

RESOLVED, the officers and agents of this Corporation appointed and named below are hereby authorized in the name of and on behalf of the Corporation to enter into an agreement with OCMBC, Inc. dba LoanStream Mortgage (LSM) to sell loans, and that these individuals are each and severally authorized to sign on said agreement and on behalf of the Corporation and to effect any changes with respect thereto.

FURTHER RESOLVED, these individuals are each and severally authorized to enter into commitments with LSM and to execute any and all other documents on behalf of this Corporation.

FURTHER RESOLVED, this Corporation shall remain in force until LSM receives, at its office, a certified copy of a resolution of this Corporation to the contrary, revoking all previous authorization heretofore given. The revocation of previous authorizations with respect to said account shall not affect the validity of any item signed by the person or persons at the time authorized to act.

Table with 3 columns: Authorized Agent Printed Name, Signature, Date. Multiple rows for agent authorization.

IN WITNESS WHEREOF, I have executed this resolution in my capacity as Secretary of this Corporation this _____ day of _____, in the year of _____.

Secretary Printed Name Signature Date