



1. Name of Applicant _____

2. Please list the breakdown of revenue by state.

_____	_____ %	_____	_____ %
_____	_____ %	_____	_____ %
_____	_____ %	_____	_____ %

3. What is the total amount of mortgages handled in the past year? _____

	Residential	Commercial
Dollar Amount of Principal	_____	_____
Number of Mortgages	_____	_____
Percentage New Construction	_____	_____
Maximum Value of Any One Mortgage	_____	_____
Average Loan Value	_____	_____

4. Please list the percentage of mortgage service activities.

Loan Underwriting _____ % Loan Servicing _____ % Loan Origination _____ %

5. What percentage of loans are:

Refinances	_____ %	2 nd Mortgages	_____ %	Sub-Prime	_____ %
Foreclosed	_____ %	Re-Purchased	_____ %	Reverse Mortgages	_____ %

6. Does the applicant have any discretionary authority to make any loans? Yes No

If yes, what is the limit? _____

7. Does the applicant lend their own funds? Yes No

8. Does the applicant have warehousing lines of credit? Yes No

If yes, what is the amount of credit of the applicant? \$ _____

9. Are loans closed without advanced commitment to purchase the loan? Yes No

- a. Average length of time the applicant is in possession of the loan. _____
- b. Maximum length of time the applicant is in possession of the loan. _____

10. Please list professional associations/affiliations. _____

11. Is the applicant approved by HUD? Yes No

12. Please list the federal sponsored agencies the applicant has relationships with. _____

13. Please attach details of quality control procedures, including procedures in place to ensure the applicant is staying in compliance with regulatory agencies and frequency of audits (both internal and external).

14. Do any of your employees or employees of a related entity perform appraisals? Yes No

The undersigned, being authorized by acting on behalf of the Applicant, warrants that to the best of his/her knowledge, and making inquiry of other firm members, the above statements are true and agrees that this Questionnaire shall be the basis of coverage and considered part of any policy issued by the Company.

“THIS SUPPLEMENTAL APPLICATION IS SUBJECT TO THE SAME PROVISIONS CONCERNING REPRESENTATIONS MADE IN THE GENERAL APPLICATION ORIGINALLY SUBMITTED TO OBTAIN PROFESSIONAL LIABILITY INSURANCE.”

Date

Signed by _____
Title Owner President Chief Executive Officer