

# Warehouse Application

**Warehouse Requested Amount:** \_\_\_\_\_ **Date** \_\_\_\_\_

### About your company

Legal name of business: \_\_\_\_\_

Federal tax identification number: \_\_\_\_\_ State tax identification number: \_\_\_\_\_

Primary business street address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP code: \_\_\_\_\_

Mailing address (if different): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP code: \_\_\_\_\_

Telephone number: \_\_\_\_\_ Facsimile number: \_\_\_\_\_

Company Web site Address: http://www. \_\_\_\_\_ MERS Number: \_\_\_\_\_

Type of business:  Corporation  Sole Proprietor  Limited Liability Company.

Partnership (Indicate Partnership type:  General  Limited  Joint Venture

Note: Attach copies of Articles of Incorporation (Articles of Organization, if an LLC) and Company By-Laws (Operating Agreement, if an LLC)

Date of Formation: \_\_\_\_\_ Under the laws of what state: \_\_\_\_\_

### Parent of Company/Subsidiaries/Affiliates, as applicable

Is the Company a subsidiary of a parent company?  No  Yes

If Yes, provide parent company information below:

Name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP code: \_\_\_\_\_

Telephone number: \_\_\_\_\_ Facsimile number: \_\_\_\_\_

Provide a list any names of affiliates/subsidiaries and any other names under which you are doing business (d/b/a).

Does the Company, its director(s), owner(s), officer(s), or employee(s) own/control/influence any companies that provide real estate related services or other services utilized by the Company?  No  Yes (If yes, please attach an explanation)

### Company Principals (List the Owners for your company)

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Percentage of ownership: \_\_\_\_\_ %

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Percentage of ownership: \_\_\_\_\_ %

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Percentage of ownership: \_\_\_\_\_ %

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Percentage of ownership: \_\_\_\_\_ %

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

If there are additional Company Principals, please attach a separate sheet with the information. Please complete Credit Report Authorization Form (last page) for each Principal.

**Company Business Contacts**

Operations Manager:	_____	Email address:	_____
Telephone number:	_____	Facsimile number:	_____
Credit contact (Underwriting):	_____	Email address:	_____
Telephone number:	_____	Facsimile number:	_____
Primary Warehouse contact:	_____	Email address:	_____
Telephone number:	_____	Facsimile number:	_____
Secondary Marketing Manager:	_____	Email address:	_____
Telephone number:	_____	Facsimile number:	_____
Collateral contact:	_____	Email address:	_____
Telephone number:	_____	Facsimile number:	_____
Contact for this application :	_____	Email address:	_____
Telephone number:	_____	Facsimile number:	_____

**Board of Directors**

Does your company have a Board of Directors?     Yes     No    If yes please list the individuals below.

Members Name	_____	Board Position	_____
Employer/Company	_____	Years Serving:	_____
Members Name	_____	Board Position	_____
Employer/Company	_____	Years Serving:	_____

**Total Number of Employees** (Please attach an Organization Chart)

Number of employees per function

Management	_____	Quality Control	_____
Loan Officers / Originators	_____	Appraisal Review	_____
Underwriters	_____	Secondary Marketing	_____
Processors	_____	Accounting	_____
Funding	_____	Loan Servicing Staff (if applicable)	_____
Post Closing	_____	Total # of Salaried Employees	_____
Shipping	_____	Total # of Commissioned Employees	_____

**Financial Information**

Please submit all of the financial information requested in the "Financial Information" section of the Checklist found at the end of this Application.

**Accountant Information**

Accounting Firm: \_\_\_\_\_  
Street: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_ AICPA Number: \_\_\_\_\_  
Date of latest Peer Review Letter: \_\_\_\_\_  
Date Accounting Firm was engaged: \_\_\_\_\_

If the Accounting Firm has been engaged less than two years, please provide previous Accountant information and an explanation for the reason that the change was made by your company.

Previous Accounting Firm: \_\_\_\_\_

*This application shall not be construed as a commitment or an agreement to enter into any further agreement between you and Impac Warehouse Lending, Inc.*

**Banking Relationships**

Bank name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP code: \_\_\_\_\_  
Primary contact person and title: \_\_\_\_\_ Telephone number: \_\_\_\_\_  
Years associated: \_\_\_\_\_ Account number(s) \_\_\_\_\_

**Credit Facilities** (Please list active, inactive and pending warehouse lines, repurchase lines, early purchase and all other credit facilities over \$100,000)

Provider: \_\_\_\_\_ Contact Name: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Facsimile number: \_\_\_\_\_ Email: \_\_\_\_\_  
Facility Size: \_\_\_\_\_ Facility Status:  Active  Inactive  Pending  
Approval date: \_\_\_\_\_ Maturity Date: \_\_\_\_\_ Personally Guaranteed Yes  No

Provider: \_\_\_\_\_ Contact Name: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Facsimile number: \_\_\_\_\_ Email: \_\_\_\_\_  
Facility Size: \_\_\_\_\_ Facility Status:  Active  Inactive  Pending  
Approval date: \_\_\_\_\_ Maturity Date: \_\_\_\_\_ Personally Guaranteed Yes  No

**Insurance Information**

Fidelity Bond Carrier: \_\_\_\_\_ Policy Number: \_\_\_\_\_  
Coverage Amount: \_\_\_\_\_ Deductible: \_\_\_\_\_  
Contact/Agent: \_\_\_\_\_ Telephone: \_\_\_\_\_

Errors and Omissions Carrier: \_\_\_\_\_ Policy Number: \_\_\_\_\_  
Coverage Amount: \_\_\_\_\_ Deductible: \_\_\_\_\_  
Contact/Agent: \_\_\_\_\_ Telephone: \_\_\_\_\_

**Current Master Policy with MI Companies**

Company Name: \_\_\_\_\_ Policy Number: \_\_\_\_\_  
Contact/Agent: \_\_\_\_\_ Telephone: \_\_\_\_\_

Company Name: \_\_\_\_\_ Policy Number: \_\_\_\_\_  
Contact/Agent: \_\_\_\_\_ Telephone: \_\_\_\_\_

**Third Party Vendor Information**

Will you be outsourcing the funding function of the loans? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please provide the following information for the third party vendor:

Company: \_\_\_\_\_ Primary Contact: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**State Licensing**

For the states in which company is licensed to originate mortgage loans, list the license number and expiration date and attach a copy of the current license. Denote states with exemption and provide supporting material for exemption status.

<u>State</u>	<u>License Number</u>	<u>Expiration Date</u>	<u>Exempt (Y/N)</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

_____	_____	_____	_____
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Has any state license been revoked?  Yes  No If yes, please attach explanation.

**Investor Information**

Investor: \_\_\_\_\_ Contact Name: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Facsimile number: \_\_\_\_\_ Email: \_\_\_\_\_  
 Date approved: \_\_\_\_\_  
 Percentage of production sold to this Investor: \_\_\_\_\_ % Investor Status:  Active  Pending

Investor: \_\_\_\_\_ Contact Name: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Facsimile number: \_\_\_\_\_ Email: \_\_\_\_\_  
 Date approved: \_\_\_\_\_  
 Percentage of production sold to this Investor: \_\_\_\_\_ % Investor Status:  Active  Pending

Investor: \_\_\_\_\_ Contact Name: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Facsimile number: \_\_\_\_\_ Email: \_\_\_\_\_  
 Date approved: \_\_\_\_\_  
 Percentage of production sold to this Investor: \_\_\_\_\_ % Investor Status:  Active  Pending

Investor: \_\_\_\_\_ Contact Name: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Facsimile number: \_\_\_\_\_ Email: \_\_\_\_\_  
 Date approved: \_\_\_\_\_  
 Percentage of production sold to this Investor: \_\_\_\_\_ % Investor Status:  Active  Pending

\*Please include any additional investors on a separate page.

**General Investor Information**

What percentage of your company's loan production is sold on a flow versus bulk basis? \_\_\_\_\_ % Flow \_\_\_\_\_ % Bulk  
 What percentage of your company's loan production is sold on a Best Efforts, Mandatory, and Assignment of Trade basis?

Best Efforts \_\_\_\_\_ % Mandatory \_\_\_\_\_ % Assignment of Trade \_\_\_\_\_ %

Was your company suspended or terminated by any investor? (If yes, please detail the investor(s) and why.)  Yes  No

**Repurchases / Indemnifications / Loans sold with recourse:**

Does your company have any open repurchase or indemnification requests?  Yes  No  
 Have you repurchased any loans or paid any sums toward settlement of any repurchase or indemnification requests in the last three years?  Yes  No  
 Has your company sold any loan(s) on a recourse basis?  Yes  No

If you answered "Yes" to any of the above, please attach a detailed explanation including the number of loans and principal amounts involved, the name of the investor, the reason for the request, and the current status of each request.

**Residential Loan Production**

	Dollar Value	Number of Loans
What is your Company's projected closed loan volume for the current fiscal year?	_____	_____
What is your Company's current pipeline? (Please attach a copy of the report)	_____	_____
What is your Company's projected pull-through rate on the current pipeline report?	_____	_____
What is your Company's minimum monthly closed volume to achieve break-even results?	_____	_____
What loan origination system does your company use? _____		

**Residential Loan Production**

Historical Loan Production						
Current Year to Date				Most Recent Fiscal Year Ended: _____		
Loan Type	Dollar Volume	Number of Loans	Percentage by Dollar Volume	Dollar Volume	Number of Loans	Percentage by Dollar Volume
Conventional						
FHA						
VA						
Jumbo						
Other						
<b>Total</b>						
<b>Purpose</b>						
Purchase						
Refinance						
<b>Total</b>						
<b>Origination Channel</b>						
Retail						
Wholesale (TPO)						
Correspondent						
<b>Total</b>						

**Servicing Portfolio Information**

Does your company service loans?       Yes       No      If yes, complete below:

Do you utilize an outside service company?       Yes       No      If yes, complete below:

Company name: \_\_\_\_\_

Contact name: \_\_\_\_\_ Telephone number: \_\_\_\_\_

Please provide the following information if not included in the current Mortgage Servicing Rights Valuation Report.

**General Questions**

Are any assets pledged or debts secured except as shown on financial statement?       Yes       No      If yes, attach details

Are any assets owned by a trust? If yes, please provide a copy of the trust agreement.       Yes       No      If yes, please provide a copy of the trust agreement.

Has Applicant or Parent Company held a direct interest (e.g., as a shareholder, member, partner, limited partner, etc.), and indirect interest (e.g., guarantor, This application shall not be construed as a commitment or an agreement to enter into any further agreement between you and Impac Warehouse Lending, Inc.

owner of parent company, affiliate), or a controlling interest (i.e., held 25% or more of the outstanding ownership interest) in any commercial entity:

- |   |                              |                             |                        |
|---|------------------------------|-----------------------------|------------------------|
|   | <input type="checkbox"/> Yes | <input type="checkbox"/> No | If yes, please explain |
| a. That filed a petition of bankruptcy, or which had an involuntary petition of bankruptcy filed against it?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No | If yes, please explain |
| b. The assets of which were foreclosed upon, given title or deed in lieu of foreclosure, or had debt forgiven by a financial institution regulated either by the federal government or by any state government? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | If yes, please explain |
| c. That defaulted (whether monetarily or otherwise, and beyond any applicable cure period) on any financial obligation related to either repayment of debt or the collateral securing such debt?                | <input type="checkbox"/> Yes | <input type="checkbox"/> No | If yes, please explain |
| d. That voluntarily or involuntarily sought, or was required, to restructure materially any financial obligations?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No | If yes, please explain |

Is Applicant or Parent Company party to any material claims or lawsuits, or had a material judgment against it?  Yes  No If yes, please explain

Is Applicant or Parent Company a "related interest" of a director, executive officer, or principal shareholder of any of the following:

- |  |                              |                             |  |
|--|------------------------------|-----------------------------|--|
| a. An insured Company or financial institution that makes commercial loans and accepts deposits? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | If yes, please provide name of institution or company. |
| b. MetLife or any of its subsidiaries?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |  |
| c. Any company controlled by any of the above?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |  |

Has any officer, director, partner or major stockholder been affiliated with any company:  Yes  No If yes, attach details.

- |   |
|---|
| a. That was suspended from selling or servicing mortgages by any investor or regulating entity? |
| b. Ever been subject to regulatory or government fines?   |

### Checklist for Required Documentation

General Company Information	
	Completed Warehouse Application.
	Application fee of \$1,500.00. Check should be made payable to Impac Warehouse Lending, Inc.
	List of all offices, to include addresses, telephone and facsimile numbers.
	List of DBA Filings or Fictitious names.
	Narrative including company history and business plan.
	Resumes of principal officers and key employees.
	Organizational Chart.
	Articles of Incorporation and By-laws
	W-9

Financial Information	
	Interim financial statements for the most recent fiscal quarter and year-to-date, including detailed balance sheet and income statement, certified by the Chief Executive Officer / President.
	Audited financial statements for the last three (3) fiscal years prepared by an Independent Certified Public Accountant.
	A summary of any off-balance sheet items not disclosed in the financial statements.
	Current portfolio aging report for loans held for investment/REO.

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	Personal Financial Statements for each Guarantor.
	Copies of Guarantors' federal and state tax returns for the 2 most current years, or applicable extension document.
	Authorization Form to obtain Credit Bureau Reports for individuals with ownership.
	Mortgage servicing rights valuations (previous year end and interim period).
	Hedging Analytics Reports, if applicable.

<b>Insurance</b>	
	Copy of Fidelity Bond including all riders and accords.
	Copy of Errors and Omissions Policy including all riders and accords.

<b>Licenses</b>	
	Copies of all state lending licenses, or evidence of exemption.
	List of pending license applications.
	List of licenses that have been surrendered with explanation for the action.

<b>Miscellaneous / Other</b>	
	Copies of most recent "Basic Status Report," including Aging of Advances for each warehouse facility.
	Copies of the three most current performance reports (Scorecards) for each investor.
	List of loans requested to be repurchased, indemnified or sold with recourse in the last three years, with explanation and current status.
	Copy of Agency approval letters.
	Copy of your company's broker application, contract/agreement and approval process (if applicable).
	Copy of Quality Control Policy and Procedures, with most current 3 months quality control reports.
	Copies of Neighborhood Watch Lender Reports, by state (omit if your company does not originate FHA loans).
	Copies of most recent state regulatory and HUD audits along with company responses.

**BORROWER CERTIFICATION**

The Financial Statement and additional supportive material, together with this completed Credit Application, is submitted to Impac for the purpose of obtaining or maintaining business-purpose credit with Impac on behalf of the undersigned or for legal entities (corporations, partnerships, etc.) on whose behalf the undersigned may either severally or jointly with others, execute a guaranty in Company's favor.

We hereby certify that all information provided to Impac is correct in all material respects and that the borrower will promptly inform Company of any material changes in the information provided. We realize that information provided in conjunction with this Request for Information questionnaire will be used in the analysis of our request for a mortgage funding facility from the Company. The undersigned entity and its officers, directors, shareholders, and/or partners hereby authorize any person, institution, credit reporting agency, or governmental agency to release information requested by the Company in conjunction with the undersigned's request for a mortgage funding facility. Borrower further certifies that they have no present intention to file for bankruptcy protection. Borrower fully understands 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 provision of Title 18, United States Code, Section 1014.

Business Name	_____	
Signature	_____	Title _____
Printed Name	_____	Date _____



## CREDIT REPORT AUTHORIZATION

Each of the undersigned hereby authorizes Impac Warehouse Lending, Inc. (the "Buyer") to obtain business and personal credit reports for each entity named below, in conjunction with the following company's warehouse line or other credit facility from the Buyer.

<b>DATE:</b>	
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<b>Individual</b>	
<b>(Primary Residence)</b>	
<b>Street Address</b>	
<b>City</b>	
<b>State</b>	
<b>Zip Code</b>	
<b>Social Security #</b>	
<b>Signature</b>	