## **Uniform Residential Loan Application**

| This application is design<br>Borrower information mube used as a basis for loan qualificaresides in a community phasis for repayment of the fifth is an application for | st also be<br>an qualific<br>ition, but<br>roperty st<br>e loan. | e provided (and the cation or the his or her liabilitie ate, the security p | e appro<br>income<br>es must<br>property | priate box ch<br>or assets of t<br>be consider<br>is located in | necked) when<br>the Borrower's<br>ed because the<br>a community | the spouse ne spous property           | or other person whose or other person state, or the Borrov | of a po<br>no has<br>has o<br>wer is | erson others community relying on | r than th<br>ty propei<br>property | e Borrower (<br>rty rights pur<br>/ rights purs | including<br>suant to s<br>uant to a | the Bor<br>state law<br>pplicable | rower's spouse) wil<br>will not be used as<br>a law and Borrowe    |  |  |
|--|--|---|--|---|---|--|--|--------------------------------------|-----------------------------------|------------------------------------|---|--------------------------------------|-----------------------------------|--|--|--|
| Borrower   |  |   |  |   |   |  | Co-Borrower  |                                      |                                   |                                    |   |                                      |                                   | _  |  |  |
|  |  |   |  | I. TYPE   | OF MORT   | GAGE                                   | AND TERMS C  | F L                                  | OAN                               |                                    |   |                                      |                                   |  |  |  |
| • • •  | <u> </u>   |   |  |   | ain):   | Ago                                    | gency Case Number  |                                      |                                   |                                    | Lender (  |                                      |                                   |  |  |  |
| Amount   |  | Interest Rate   |  | o. of Month   |   | tizatio                                | =  | e [                                  | =                                 | (explain                           | n):   |                                      |                                   |  |  |  |
| \$   |  |   | % <u>"</u>                               | DDODED.   | Type:   |  | GPM SAND PURPO   | SE C                                 | ARM (                             | • • •                              |   |                                      |                                   |  |  |  |
| Subject Property Add   | dress (s   | treet city stat   |  | -   | I I INFORM  | IATIOI                                 | AND FURFO  | SE C                                 | DE LOAN                           |                                    |   |                                      |                                   | No. of Units   |  |  |
|  | u. 000 (0  | aroot, orty, otal   | .o, u <u>_</u>                           | ,   |   |  |  |                                      |                                   |                                    |   |                                      |                                   | Tio. of Grito  |  |  |
| Legal Description of   | Subject  | Property (atta  | ich de                                   | scription if  | necessary)  |  |  |                                      |                                   |                                    |   |                                      |                                   | Year Built   |  |  |
| Purpose of Loan:   | Purcha<br>Refina   |   | structi<br>structi                       | on<br>on-Permar   | Other onent   | (explair                               | n):  |                                      | roperty w<br>Prima<br>Reside      | ry [                               | ☐ Second  |                                      | Inv                               | estment  |  |  |
| Complete this line   | if const   | ruction or co   |  | •   |   |  |  |                                      |                                   |                                    |   |                                      |                                   |  |  |  |
| Year Lot Acquired  | Origina<br>\$  | al Cost   | A<br>\$                                  | 1   |   |  |  |                                      |                                   | (b) Cost of Improvements Total \$  |   |                                      | tal (a+l                          | (a+b)  |  |  |
| Complete this line   |  | s a refinance   |  |   |   | 1 +                                    |  |                                      | 1 +                               |                                    |   | 1 +                                  |                                   |  |  |  |
| Year Acquired  | Origina  |   |  | mount Exis  | sting Liens   | Purp                                   | ose of Refinanc  | е                                    |                                   | Describ                            | oe Improver                                     | nents _                              | made                              | e to be made   |  |  |
|  | \$   |   | \$                                       |   |   |  |  |                                      |                                   | Cost \$                            |   |                                      | 1                                 |  |  |  |
| Title will be held in w  |  |   | arges a                                  | and/or Subo   | ordinate Fin  | ancing                                 | Manner ii  | n wh                                 | ich Title                         | will be                            | held  |                                      |                                   | ate will be held in:    Fee Simple   Leasehold   Lexpiration date) |  |  |
|  | Borrow   | er  |  |   | III BORRO   | )WFR                                   | INFORMATION  | 1                                    |                                   |                                    | Co-B  | orrowe                               | r                                 |  |  |  |
| Borrower's Name (in  |  |   | icable                                   | )   | Dorate  | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | Co-Borrower's  |                                      | ne (inclu                         | de Jr. c                           | -   |                                      |                                   |  |  |  |
| Social Security Number   | 1  | Phone (incl. area   |  |   | DD/YYYY) Yrs  | . School                               | Social Security Nu   |                                      |                                   |                                    |   |                                      |                                   | YYYY) Yrs. Schoo   |  |  |
| □ Maurical □ II  |  |   | Donone                                   | lanta (not lia  | ted by Co-Bo  | rrouvor)                               | NA amia d  | 1                                    |                                   |                                    | · In  | nondont                              | o (not li                         | sted by Borrower)  |  |  |
| divor  | arried (in<br>ced, wide  | 3 -,  | no.                                      | ages  | led by Co-Bo  | nower)                                 | Married _  |                                      | married (ir<br>orced, wid         |                                    | ingle De  |                                      | •                                 | sted by Borrower)  |  |  |
| Separated  |  |   |  | <u> </u>  |   |  | ☐ Separated  |                                      |                                   |                                    |   |                                      |                                   |  |  |  |
| Present Address (str   | eet, city  | , state, ZIP)   |  | wn 🔲 Re   | ent No.   | Yrs.                                   | Present Addre  | ss (s                                | street, cit                       | y, state                           | e, ZIP)   | ] Own [                              | Re                                | nt No. Yrs   |  |  |
| Mailing Address, if different from Present Address   |  |   |  |   |   |  | Mailing Address, if different from Present Address         |                                      |                                   |                                    |   |                                      |                                   |  |  |  |
| If residing at prese   | nt addr  | ess for less ti   | han tv                                   | o years, c  | omplete th  | e follo                                | wing:  |                                      |                                   |                                    |   |                                      |                                   |  |  |  |
| Former Address (stre   | eet, city  | , state, ZIP)   |  | wn 🔲 Re   | ent No.   | Yrs.                                   | Former Addres  | ss (st                               | treet, city                       | , state,                           | ZIP)  | ]Own [                               | Re                                | nt No. Yrs   |  |  |
|  | Borrow   | er  |  |   | V. EMPLO  | YMEN1                                  | INFORMATIO   | N                                    |                                   |                                    | Co-B  | orrowe                               | r                                 |  |  |  |
| Name & Address of  | Employ   | er 🔲  | Self I                                   | Employed  | Yrs. on thi   | s job                                  | Name & Addre   | ess c                                | of Emplo                          | yer                                | Self  | Employ                               | ed                                | Yrs. on this job   |  |  |
|  |  |   |  |   | Yrs. employ<br>this line of<br>work/profes                      |  | _  |                                      |                                   |                                    |   |                                      | i                                 | Yrs. employed<br>n this line of<br>work/profession                 |  |  |
| Position/Title/Type of   | of Busine  | ess   | Busine                                   | ess Phone   | (incl. area o   | code)                                  | Position/Title/  | Гуре                                 | of Busir                          | ness                               | Bus   | siness F                             | hone                              | (incl. area code)  |  |  |
| If employed in curr  | ent pos  | sition for less   | than                                     | two years   | or if curre   | ntly em                                | l<br>ployed in more  | e tha                                | an one p                          | ositior                            | n, comple                                       | te the fo                            | ollowi                            | ng:  |  |  |

|   |                       | IV.            | V. EMPLOYMENT INFORMATION |                             |                   |                                     |   | Co-Borrower   | •              | _               |                   |  |
|---|-----------------------|----------------|---------------------------|-----------------------------|-------------------|-------------------------------------|---|---|----------------|-----------------|-------------------|--|
| Name & Address of                                     | Self En               | nployed Da     | ates                      | s (from-to)                 | Name 8            | Address of Employer                 |   | Self Employe  | ed             | Dates (from-to) |                   |  |
|   |                       |                | M                         | onth                        | nly Income        |                                     |   |   |                |                 | Monthly Income    |  |
|   |                       |                | \$                        |                             |                   |                                     |   |   |                |                 | \$                |  |
| Position/Title/Type of Business Business Phone (i     |                       |                |                           |                             | (incl. area code) |                                     | /Title/Type of Business   | 3   | Business Pl    | hone            | (incl. area code) |  |
| Name & Address of Employer Self Employed              |                       |                |                           |                             | s (from-to)       | Name 8                              | Address of Employer   |   | Self Employe   | ed              | Dates (from-to)   |  |
|   |                       |                | M                         | onth                        | nly Income        |                                     |   |   |                |                 | Monthly Income    |  |
|   |                       |                | \$                        |                             |                   |                                     |   |   |                |                 | \$                |  |
| Position/Title/Type o                                 | f Business            | Busine         | ss Phone (in              | ıcl. a                      | area code)        | Position                            | /Title/Type of Business   | 3   | Business Pl    | hone            | (incl. area code) |  |
|   | ٧                     | . MONTHLY      | INCOME A                  | ND                          | COMBINED          | HOUSI                               | NG EXPENSE INFORM   | MATION  |                |                 |                   |  |
| Gross Monthly<br>Income                               | Borrower              | С              | Co-Borrower               |                             | Total             | Combined Monthly<br>Housing Expense |   | Present   |                | Proposed        |                   |  |
| Base Empl. Income*                                    | \$                    | \$             |                           | 9,                          | \$                |                                     | Rent  | \$  |                |                 |                   |  |
| Overtime  |                       |                |                           |                             |                   |                                     | First Mortgage (P&I)  |   |                | \$              |                   |  |
| Bonuses   |                       |                |                           |                             |                   |                                     | Other Financing (P&I)   |   |                |                 |                   |  |
| Commissions   |                       |                |                           |                             |                   |                                     | Hazard Insurance  |   |                |                 |                   |  |
| Dividends/Interest                                    |                       |                |                           |                             |                   |                                     | Real Estate Taxes   |   |                |                 |                   |  |
| Net Rental Income                                     |                       |                |                           |                             |                   |                                     | Mortgage Insurance  |   |                |                 |                   |  |
| Other (before completing, see the notice in "describe |                       |                |                           |                             |                   |                                     | Homeowner Assn. Dues  |   |                |                 |                   |  |
| other income," below)                                 |                       |                |                           |                             |                   |                                     | Other:  |   |                |                 |                   |  |
| Total   | \$                    | \$             |                           | \$                          | \$                |                                     | Total   | \$  |                | \$              |                   |  |
| B/C   |                       |                |                           |                             |                   |                                     |   |   |                | \$              | Ionthly Amount    |  |
|   |                       |                |                           |                             |                   |                                     |   |   |                |                 |                   |  |
|   |                       |                | V                         | /I. A                       | SSETS AND         | ) LIABIL                            | ITIES   |   |                |                 |                   |  |
| the Statement can be me                               | aningfully and fairly | presented on a | combined basi             | is; ot                      | herwise separa    | te Stateme                          | nnmarried Co-Borrowers if the<br>ents and Schedules are requ<br>ut that spouse or other perso | ired. If the  | Co-Borrower se |                 |                   |  |
| ASSETS Cash or Market Description Value               |                       |                |                           |                             |                   |                                     | ssets. List the creditor's automobile loans, revolvi  | s name, a   | address and    | accou           | unt number for al |  |
| Cash deposit toward pu                                | irchase held by:      | \$             | c                         | hild                        | support, stock    | c pledges,                          | etc. Use continuation sh  | sheet, if necessary. Indicate by (*) those liabilities or upon refinancing of the subject property. |                |                 |                   |  |
|   |                       |                |                           |                             |                   | LIABILI                             | ΓΙES  | Monthly Payment &<br>Months Left to Pay   |                | Unpaid Balance  |                   |  |
| List checking and savings accounts below              |                       |                |                           | Name and address of Company |                   |                                     |   |   | t/Months       | \$              |                   |  |
| Name and address of B                                 | Bank, S&L, or Credi   | t Union        |                           |                             |                   |                                     |   |   |                |                 |                   |  |
|   |                       |                |                           |                             |                   |                                     |   |   |                |                 |                   |  |
|   |                       |                | А                         | Acct.                       | no.               |                                     |   |   |                |                 |                   |  |
| Acct. no. \$  |                       |                | N                         | Name and address of Company |                   |                                     | \$ Paymer   | nt/Months   | \$             |                 |                   |  |
| Name and address of B                                 | ank, S&L, or Credi    | t Union        |                           |                             |                   |                                     |   |   |                |                 |                   |  |
|   |                       |                | A                         | cct.                        | no.               |                                     |   |   |                |                 |                   |  |
| Acct. no.   | <u> </u>              | \$             | N                         | lame                        | e and address     | of Compa                            | ny  | \$ Paymen   | t/Months       | \$              | <u> </u>          |  |
| Name and address of B                                 | ank, S&L, or Credi    | t Union        |                           |                             |                   |                                     |   |   |                |                 |                   |  |
|   |                       |                | Ad                        | cct. r                      | no.               |                                     |   |   |                |                 |                   |  |

|  |       |           |            |  | VI. ASSE  | TS AND LIAB                      | LITIES              |                       |                               |                       |          |         |     |    |
|--|-------|-----------|------------|--|---|----------------------------------|---------------------|-----------------------|-------------------------------|-----------------------|----------|---------|-----|----|
| Acct. no.  | \$    |           |            |  | Name and a  | address of Comp                  |                     | \$ Payment/N          | Months                        | \$                    |          |         |     |    |
| Name and address of Bank, S&L, or Credit Union   |       |           |            |  |   |                                  |                     |                       |                               |                       |          |         |     |    |
|  |       |           |            |  |   |                                  |                     |                       |                               |                       |          |         |     |    |
|  |       |           |            |  |   |                                  |                     |                       |                               |                       |          |         |     |    |
|  |       | Acct. no. |            |  |   |                                  |                     |                       |                               |                       |          |         |     |    |
| Acct. no.  | \$    |           |            |  | Name and a  | address of Comp                  | any                 |                       | \$ Payment/N                  | Months                | \$       |         |     |    |
| Stocks & Bonds (Company name/number \$   |       |           |            |  |   |                                  |                     |                       |                               |                       |          |         |     |    |
| & description)   |       |           |            |  |   |                                  |                     |                       |                               |                       |          |         |     |    |
|  |       |           |            |  |   |                                  |                     |                       |                               |                       |          |         |     |    |
|  |       |           |            |  | Acct. no.   |                                  |                     |                       |                               |                       |          |         |     |    |
|  |       |           |            |  | Name and address of Company   |                                  |                     |                       |                               | \$ Payment/Months     |          |         |     |    |
| Life insurance net cash value  | \$    |           |            |  |   |                                  |                     |                       |                               |                       |          |         |     |    |
| Face amount: \$  |       |           |            |  |   |                                  |                     |                       |                               |                       |          |         |     |    |
| Subtotal Liquid Assets   | \$    |           |            |  |   |                                  |                     |                       |                               |                       |          |         |     |    |
| ,  | \$    |           |            |  | Acct. no.   |                                  |                     |                       |                               |                       |          |         |     |    |
| from schedule of real estate owned)  | •     |           |            |  | Name and a  | address of Comp                  | any                 |                       | \$ Payment/N                  | Months                | \$       |         |     |    |
|  | \$    |           |            |  |   |                                  |                     |                       |                               |                       |          |         |     |    |
| Net worth of business(es) owned (attach financial statement)                             | \$    |           |            |  |   |                                  |                     |                       |                               |                       |          |         |     |    |
| Automobiles owned (make and year)  | \$    |           |            |  |   |                                  |                     |                       |                               |                       |          |         |     |    |
|  |       |           |            |  | Acct. no.   | ild Cupport/Cope                 | urata Maintananaa   |                       | \$                            |                       |          |         |     |    |
|  |       |           |            |  | Payments C  |                                  | rate Maintenance    |                       | \$                            |                       |          |         |     |    |
| Other Assets (itemize)   | \$    |           |            |  |   |                                  |                     |                       |                               |                       |          |         |     |    |
|  |       |           |            | ŀ  | Job-Related   | d Expense (child                 | \$                  | 1                     |                               |                       |          |         |     |    |
|  |       |           |            |  |   |                                  |                     |                       | ·                             |                       |          |         |     |    |
|  |       |           |            |  |   |                                  | _                   | 1                     |                               |                       |          |         |     |    |
|  |       |           |            |  |   | lly Payments                     |                     | \$                    |                               |                       |          |         |     |    |
| Total Assets a. \$   |       |           |            | Net Worth (a minus b)                                      |   | Total Liabilities b.             |                     |                       |                               |                       |          |         |     |    |
| Schedule of Real Estate Owned (If additi   | ional | prope     | erties are | owned  | <u> </u>  |                                  |                     |                       |                               |                       | <u> </u> |         |     |    |
| ,  |       |           | Type of    |  | Present   | Amount of                        | Gross               | Ι.                    | Mortgage                      | Insurar<br>Maintena   |          |         | Net |    |
| Property Address (enter S if sold, PS if pending sale R if rental being held for income) |       |           |            | rket Value   | Mortgages & Lie   |                                  | Payments            |                       | Taxes &                       | ,                     | Rent     | al Inco | ome |    |
|  |       | \$        |            | \$   |   | \$                               | \$                  |                       |                               | \$                    |          | \$      |     |    |
|  |       |           |            | Ψ  |   | Ψ                                | Ψ                   | \$                    |                               | Ψ                     |          | Ψ       |     |    |
|  |       |           |            |  |   |                                  |                     |                       |                               |                       |          |         |     |    |
|  |       |           |            |  |   |                                  |                     |                       |                               |                       |          |         |     |    |
|  |       |           |            |  |   |                                  |                     | 1                     |                               |                       |          |         |     |    |
|  |       |           | Totals     |  |   | \$                               | \$                  | \$                    |                               | \$                    |          | \$      |     |    |
| List any additional names under which Alternate Name                                     | cred  | it has    | previou    | sly be   | en received   | and indicate ap<br>Creditor Name | opropriate creditor | name(s                | s) and accou                  | Int number<br>Account | ٠,       | r       |     |    |
| , itemate Name   |       |           |            |  |   | Ordanor Hamo                     |                     |                       |                               | 7100041111            | Tarribo  |         |     |    |
|  |       |           |            |  |   |                                  |                     |                       |                               |                       |          |         |     |    |
| VII DETAILS OF TRA   | ANG   | ۸СТ       | ION        |  |   |                                  | V                   | III DE                | CI ADATI                      | ONE                   |          |         |     |    |
| a. Purchase Price \$   |       |           |            |  | If you ans  | wer "Yes" to ar                  | please use Borrower |                       |                               |                       |          | rower   |     |    |
| b. Alterations, improvements, repairs  |       |           |            |  |   | ion sheet for ex                 |                     | J /1                  |                               | -                     |          |         | 'es | No |
| c. Land (if acquired separately)   |       |           |            |  | a. Are the  | re any outstandi                 | t you?              | ,                     |                               |                       |          |         |     |    |
| d. Refinance (incl. debts to be paid off)  |       | 1         |            |  | b. Have y   | ou been declare                  | years?              |                       | $\Box \mid \Box$              |                       |          |         |     |    |
| e. Estimated prepaid items   |       |           |            | c. Have you had property foreclosed upon or given title of |   |                                  |                     |                       | e or deed in lieu thereof     |                       |          |         |     |    |
| f. Estimated closing costs   |       |           |            |  | in the last 7 years?  |                                  |                     |                       |                               |                       |          | _       | _   |    |
| g. PMI, MIP, Funding Fee   |       |           |            |  | d. Are you a party to a lawsuit?  |                                  |                     |                       |                               |                       |          |         |     |    |
| h. Discount (if Borrower will pay)   |       |           |            |  | e. Have you directly or indirectly been obligated on any loan which resulted in foreclosure, transfer of title in lieu of foreclosure, or judgment? |                                  |                     |                       |                               |                       |          |         |     |    |
| i. Total costs (add items a through h)   |       |           |            |  | (This would include such loans as home mortgage loans, SBA lo<br>educational loans, manufactured (mobile) home loans, any                           |                                  |                     | , SBA loa<br>s, any n | pans, home improvement loans, |                       |          |         |     |    |
| j. Subordinate financing   |       |           |            |  | bond, or loan guarantee. If "Yes," provide details, including date, FHA or VA case number, if any, and reasons for the action.)                     |                                  |                     |                       |                               |                       |          |         |     |    |
| k. Borrower's closing costs paid by Seller   |       |           |            |  |   |                                  |                     |                       |                               |                       |          |         |     |    |
|  |       |           |            |  | ĺ   |                                  |                     |                       |                               |                       |          |         |     |    |

| VII. DETAILS C   | OF TRANSACTION   |  |   | VIII. DECLARATIONS   |  |  |   |  |  |
|--|--|--|---|--|--|--|---|--|--|
| I. Other Credits (explain)   |  | If you answer "Yes   | "Yes" to any questions a through i, please use  |  |  | ower   | Со-Во   | rrowe  |  |
|  |  | continuation sh  |   |  | Yes  |  | Yes   | No   |  |
|  |  | loan, mortgage,  | financial obliga  | or in default on any Federal debt or any o<br>ation, bond or loan guarantee?<br>n the preceding question.  | ther   |  |   |  |  |
|  |  | g. Are you obligate  | d to pav alimo  | ony, child support, or separate maintenan  | ce?  |  |   |  |  |
|  |  | h. Is any part of the  |   | *  |  |  |   |  |  |
|  |  | i. Are you a co-ma   |   |  |  |  |   |  |  |
|  |  |  |   |  | Ш  | Ш  |   |  |  |
|  |  | j. Are you a U.S. c  | itizen?   |  |  |  |   |  |  |
| m. Loan amount   |  | k. Are you a perma   | nent resident   | alien?   |  | $\Box$   |   |  |  |
| (exclude PMI, MIP, Funding Fee   |  |  |   | property as your primary residence?  |  | $\Box$   |   |  |  |
| n. PMI, MIP, Funding Fee financed  | 1  | If "Yes," complete q   |   |  | . –  | $\overline{}$  |   | $\overline{\Box}$  |  |
| o. Loan amount (add m & n)   |  | -  | •   | nterest in a property in the last three year   |  | Ш  | ш   | ш  |  |
| p. Cash from / to Borrower   |  | (1) What type of home (SH), o  |   | vou own – principal residence (PR), seco<br>property (IP)?   | nd<br>   |  |   |  |  |
| (subtract j, k, I & o from i)  |  | ` '  |   | e home – solely by yourself (S), jointly wi  | th   |  |   |  |  |
|  |  | your spouse  | (SP), or jointly  | with another person (O)?   |  |  |   |  |  |
|  |  |  |   |  |  |  |   |  |  |
|  | DV 4.01  | (1014// 55.051451  | T 411D 400  |  |  |  |   |  |  |
|  |  | NOWLEDGEMEN  |   | REEMENT s, brokers, processors, attorneys, insure  |  |  |   |  |  |
| made for the purpose of obtaining assigns may retain the original an successors and assigns may conting application if any of the material fadelinquent, the Lender, its servicer and account information to one or ras may be required by law; (10) implied, to me regarding the propesignature," as those terms are define a facsimile of my signature, shall be Acknowledgement: Each of the un | a residential mortgage loan; (5) d/or electronic record of this appl nuously rely on the information co acts that I have represented here, s, successors or assigns may, in more consumer reporting agencie: neither Lender nor its agents, brity or the condition or value of the ned in applicable federal and/or stee as effective, enforceable and valuersigned hereby acknowledges ain any information or data relating agency. | the property will be of ication, whether or no intained in the application should change properties; (9) ownership of the okers, insurers, service property; and (11) in ate laws (excluding allid as if a paper version that any owner of the | occupied as in ot the Loan is tition, and I am ior to closing rights and ree Loan and/or cers, success my transmissic udio and video on of this applie Loan, its set y legitimate b | rohibited purpose or use; (4) all statement of the Lend sapproved; (7) the Lender and its agent obligated to amend and/or supplement of the Loan; (8) in the event that my permedies that it may have relating to such administration of the Loan account may sors or assigns has made any represent of this application as an "electronic report or ecordings), or my facsimile transmissic ication were delivered containing my originatives, successors and assigns, may verusiness purpose through any source, in er's Signature | er, its sents, brokers the inform ayments of a delinque be transfentation or cord" control of this a final writte erify or revoluting a sent to the se | vicers, s, insur- ination pon the oncy, re- erred warrantaining application is signared werify a | succes<br>rers, se<br>provided<br>Loan the<br>port my<br>ith such<br>ty, exp<br>my "ele<br>tion cor<br>ature. | ssors of servicers d in this occome y name in notice oress of occurrence or the interior of the interior occurrence or the interi |  |
|  | X. INFORMATION   | FOR GOVERNM  | ENT MONIT   | ORING PURPOSES   |  |  |   |  |  |
| opportunity, fair housing and home<br>not discriminate either on the basis<br>you may check more than one desi<br>visual observation and surname if y  | mortgage disclosure laws. You all<br>s of this information, or on whether<br>ignation. If you do not furnish ethr<br>you have made this application in   | re not required to furnier you choose to furninicity, race, or sex, un person. If you do not to which the lender is  | ish this inform<br>sh it. If you fu<br>der Federal re<br>wish to furnish<br>s subject unde  | a dwelling in order to monitor the lender<br>nation, but are encouraged to do so. The<br>irnish the information, please provide bo<br>egulations, this lender is required to note<br>the information, please check the box le<br>er applicable state law for the particular ty   | law provion<br>th ethnicit<br>the inforn<br>below. (Le   | des that<br>y and in<br>nation in<br>nder m  | it a lend<br>race. Fo<br>on the l<br>nust rev   | der may<br>or race<br>basis o  |  |
| BORROWER   | n to furnish this information.   | С  | O-BORROV  |  |  |  |   |  |  |
| Ethnicity: Hispanic or   | Latino Not Hispanic or   | Latino <b>E</b>  | o Ethnicity: Hispanic or Latino Not His   |  |  |  |   |  |  |
| Race: American In  |  | ace:   | American Indian or As   | ian [  | _  | ck or  |   |  |  |
| Alaska nativ  Native Hawa Other Pacifi   | frican American  |  | Alaska native  Native Hawaiian or Wh Other Pacific Islander   | nite   | Am   | can Am   | nerican   |  |  |
| Sex: Female  | Male Male  | s  | ex:   | Female Ma  | ıle  |  |   |  |  |
| To be Completed by Interviewer   | Interviewer's Name (print or type)   | )  |   | Name and Address of Interviewer's Emp  | loyer  |  |   |  |  |
| This application was taken by:  Face-to-face interview   | Interviewer's Signature  |  | Date  |  |  |  |   |  |  |
| Mail   | Interviewer's Phone Number (incl   | L area acds)   |   |  |  |  |   |  |  |
| ☐ Telephone ☐ Internet   | i. area code)  |  |   |  |  |  |   |  |  |