New Jersey Housing & Mortgage Finance Agency Participation Application

THE UNDERSIGNED APPLICANT HEREBY OFFERS TO PAY THE NEW JERSEY HOUSING & MORTGAGE FINANCE AGENCY (the "NJHMFA") a Participation Fee in consideration for the NJHMFA's approval to participate in the Agency's Single Family programs. If approved, the Applicant may sell mortgage loans to the Agency under the Single-Family Mortgage Programs and is required to execute the NJHMFA Mortgage Purchase Agreement. A \$2,000 annual participation fee is required to be paid by the lender upon acceptance of the approval. The fee will be used by the Agency to advance the program, including system and process enhancements, website improvements, program expansion, and other tools which will make the program more efficient for Participating Lenders, homebuyers, and the Agency.

This participation Application is and shall be incorporated as part of the Mortgage Purchase Agreement between the NJHMFA and the Applicant.

PLEASE FURNISH THE INFORMATION REQUIRED ON EXHIBIT A OF THIS PARTICIPATION APPLICATION.

IN WITNESS THEREOF, th executed on the	_		•	Application	to	be	duly
Name of Applicant							
Address:							
City		State	Zip				
Phone:		Fax:					
e-mail:		_					

I certify that I am authorized to act on behalf of the Applicant and to enter into agreements and contracts for the same. I further certify that the foregoing information and attachments are, to the best of my knowledge, true and complete. It is understood that the NJHMFA is relying upon this information. It is further understood that any false statements or misrepresentations may subject me and/or the undersigned entity to termination of participation in this or other NJHMFA programs and other sanctions, as may be provided by law.

It is understood and agreed that as a condition to participating in the NJHMFA's programs, Lender/Seller must meet and continue to meet NJHMFA guidelines and qualifications.

	LENDING INSTITUTION
Attesting Witness:	
	Signature
	Name (print)
	Title

(Corporate Seal)

For a corporation or li	mited liab	ility corporation	on.							
STATE OF)							
		ss.:								
COUNTY OF:)							
BE IT REMEMBERED,	that on					_, 20	_, b	efore	me,	the
subscriber, personally	appeared	l				_(signe	ee) wl	ho, bei	ng b	y me
duly sworn on his/he	er oath, d	eposes and m	nakes pro	of to r	ny sa	tisfacti	on th	at he/s	she is	s the
Secretary of the	lending	corporation	named	in t	he v	within	cert	ificatio	n; t	that
		is the _							_	
of said Corporation; th	nat the ex	ecution, as we	ell as the r	making	of this	s Instru	ment	, has b	een c	luly
authorized by a prope	r resoluti	on of the Boar	d of Dire	ctors of	said	Corpor	ation;	that d	epon	ent
well knows the corpor	rate seal o	of said Corpora	ation, and	l that th	he sea	al affixe	d to	said Ins	strum	ent
is the proper corporat	e seal an	d was thereto	affixed a	nd said	Instru	ument	signe	d and c	lelive	red
by the signer as and	for the v	oluntary act a	nd deed	of said	Corp	oratior	n, in t	he pre	sence	e of
deponent, who thereu	ipon subs	cribed his/her	name her	eto as	attest	ing wit	ness.			
SWORN and subscribe	d before	me on the Dat	e Aforesa	id.						
(Notary or	Attorney)				Secre	etary				
Seal										

Exhibit A

Please fill out the following information:

1.	Applicant was organized onunder the laws of						
2.	Check if applicant is:						
	A mortgage banker licensed by the state of New Jersey.						
	A correspondent mortgage banker licensed by the state of New Jersey.						
	N.J. bank, savings and loan or other registered entity.						
	A federally chartered lending institution.						
	Other (specify)						
3.	Provide a copy of your company's current licenses to originate loans in New Jersey or,	if					
	not, governed by the New Jersey Department of Banking & any such other authority to)					
	originate mortgage loans and to do business in the state.						
4.	Provide a copy of your New Jersey Business Registration Certificate.						
If c	out-of-state organization, address & contact person in a New Jersey office:						
	ranch Address:ontact:						
C	ontact						
Pł	hone:Fax:						
5.	Check if the applicant is:						
	Fannie Mae approved seller						
	Freddie Mac approved seller						
	FHA approved mortgagee						
	VA approved mortgagee						
	USDA (U.S. Dept. of Agriculture) approved mortgagee						
Pro	ovide appropriate approvals as indicated.						

- 6. Provide proof that the lender's FHA Neighborhood Watch comparison ratio does not exceed 120% of that agency's national, state or local regional office.
- 7. Attach two copies of the most recent independent audit on the Lender. If financial reports have been prepared for an accounting period since the most recent audit, also attach a copy of each such financial report marked "Unaudited". (Lenders new to our programs need to include the past three years' financials.)
- 8. Provide proof that net worth is equal to or in excess of requirements mandated by FHA

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Brai Pho 800 Wel Ema Mai	# (if applicable):
Brai Pho 800 Wel Ema	# (if applicable): ebsite address: rail: Yes, this Branch should be on the HMFA Approved Lender List
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City	inch Phone #:
City	dress:y, State & Zip:
	rporate Office
	bsite.
out	treach events throughout the State of New Jersey and is posted on the HMFA
	ease provide your Branch information below and state if you would like this ormation used on the Agency's Approved Lender List. This list is disseminated a
	Deliver Third Party Originated (Brokered) Loans
	PFRS – Police and Firemen's Retirement System Mortgage Loan Program
	HFA Advantage Conventional Program
	- HEA Advantage Conventional Program
	Homeward Bound Program
	First Time Home Buyer Program
	ease check all boxes that are applicable:
. Ple	
	rannie Mae, wnichever is nigher.
	Fannie Mae, whichever is higher.

Phone	e # (Consumers):
800 #	(if applicable):
Webs	ite address:
Email	
	Yes, this Branch should be on the HMFA Approved Lender List
Branc	ch 1 (If there are more than two branches, please use additional copies of this
form.)
Addre	ess:
	State & Zip:
Branc	h Phone #:
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800 #	(if applicable):
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Email	
	Yes, this Branch should be on the HMFA Approved Lender List
_	
	e list information below for your Internet Loan Reservation System
-	nistrator.
	ndividual will be responsible for granting and managing loan officers' access to the
ILRS.	
Name	2:
Phone	e:Ext:

12. Please identify the main person and a secondary backup at your institution to which general correspondence, bulletins and revisions to the Seller's Guide should be addressed. This main contact is responsible for getting all information disseminated to your staff at all your branches.

Name:	Title
Address:	Phone:
	Fax:
	e-mail:
Name:	Title
Address:	Phone:
	Fax:
	e-mail:
Please identify any other p	ersons you would like to receive general correspondence and
e-mails.	
Name:	Title
Address:	Phone:
	Fax:
	e-mail:
Name:	Title
Address:	Phone:
	Fa
	e-mail:

- 13. Submit resumes of all FHA Direct Endorsement Underwriters along with their CHUMS #.
- 14. Provide a quality control plan for loan origination, along with approvals from applicable insurers and guarantors.
- 15. Lender must have fidelity bond and mortgage errors and omissions coverage in an amount at least equal to \$500,000 and provide a certificate from the insurance carrier naming the New Jersey Housing and Mortgage Finance Agency as a party in interest to the bond, or the policy shall name the New Jersey Housing and Mortgage Finance Agency as one of the parties insured.

- 16. Provide a copy of the lender's hiring procedures for checking all employees, including management, involved with the origination of mortgage loans against the GSA Exclusionary List and the HUD LDP list.
- 17. Provide a copy of the lender's policy regarding compensation of all staff considered as loan originators under CFPB regulations.
- 18. Provide a copy of the lender's appraiser independence policies and procedures which shall, at a minimum, satisfy Fannie Mae Appraiser Independence requirements.
- 19. Mortgage Loan Origination and Servicing Information.

The following information should be supplied only on 1 to 4 family mortgages originated and serviced by the Lender during the applicable periods. (Please list dates for each quarter, e.g., 3/01, 6/01, etc.)

Mortgage Loans		Previous Four Quarters					
Originated		/ /	/ /	/ /	/ /		
	#						
FHA	\$						
	#						
VA	\$						
	#						
USDA	\$						
Conventional Privately	#						
Insured	\$						
Conventional Uninsured	#						
	\$						
Total #:	0	0	0	0	0		
All Types \$:	0.00	0.00	0.00	0.00	0.00		

NOTICE

Attached please find a copy of the NJHMFA form WAREHOUSE LENDER REPRESENTATIONS AND CONVENANTS REGARDING BAILEE LETTERS, HMFA #725.

Please sign below, check off whether you use a warehouse bank and return this notice. We must have a response from you whether you use a warehouse bank or not.

WAREHOUSE LENDER REPRESENTATIONS & COVENANTS REGARDING BAILEE LETTERS

Wareh	ouse Lender:		
Wareh	ouse Lender Address:		
Hereina	after the "Warehouse Lender"		
be bou	and by the terms of the War ized representative, whose sig	ousing & Mortgage Finance Agency ehouse Lender's Bailee Letter, the gnature appears below, represents	Warehouse Lender, by its duly
1)	Warehouse Lender agrees the New Jersey Contractual Liathereof.) While this statue is with the Agency, the Warehouse Bailee Letter. It is acknown	FA's acceptance of the Warehounat any claims asserted against the bility Act, N.J.S.A. 59:13-1 et. seen not applicable by its terms to claimse Lender agrees that it shall be awledged by the Warehouse Lender the New Jersey Tort Claims Act, N.J.	e Agency shall be subject to the eq. (except for N.J.S.A. 59:13-9 ms arising under this agreement applicable to claims arising under that the HMFA is a public entity
2)	the HMFA for, any losses, da expenses of any nature, inc	indemnify and hold the HMFA har mages, liabilities, deficiencies, clain luding attorneys' fees and cost, in the HMFA taken at the direction of the	ns, causes or action or costs and curred by the HMFA that result
3)		venants of the Warehouse Lender applicability to all Bailee Letters tl	_
4)	cause or explanation refuse	owledges and agrees that the HMI to accept future Bailee Letters. In seturn the Bailee Letter and the momenticipation of bailment.	such event, the HMFA will notify
	Signature	Name:	(print)
	Date:	Title: _	(print)