

# Application for FHA Lender Approval

OMB Approval Numbers 2502-0005  
(exp. \_\_\_\_\_)

<input type="checkbox"/> <b>New FHA Lender Approval</b> Sections 1, 2, 3, 5, 6 & 7		<input type="checkbox"/> <b>Conversion of FHA Approval</b> Sections 1, 4, 5, 6 & 7		
<b>Section 1. Information Required From All Applicants</b>				
Name			TAX ID	
DBA (if applicable)		Date Incorporated, Organized or Chartered		
Geographic Address		Mailing Address (if different)		Fiscal Year End (Month):
County:		Phone:	FAX:	
Web Site:		eMail:		
Contact Person for Application:	Name	eMail	Phone	FAX
All Applicants must provide the information below for officers, along with owners having a 25% or greater ownership interest in the applicant. Please indicate which officer(s) are in charge of the day-to-day operations of the applicant.				
Officer/Owner Name	Title (If Applicable)	Officer in Charge?	Social Security or TAX ID Number	Percent Ownership
		<input type="checkbox"/>		
		<input type="checkbox"/>		
		<input type="checkbox"/>		
		<input type="checkbox"/>		
		<input type="checkbox"/>		

<b>History and Business Status Questions</b>
Please check the appropriate answer for each question below. If any of the questions require a "Yes" answer, provide an explanation on a separate sheet.
<input type="checkbox"/> Yes or <input type="checkbox"/> No
1. Is the applicant the subject of any assessments, or contingent liabilities not disclosed in its financial statements?
<input type="checkbox"/> Yes or <input type="checkbox"/> No
2. Has the applicant or any of its principals, officers, individuals serving on the Board of Directors, or individuals acting as authorized signatories, ever been, or are any presently suspended, terminated, debarred, sanctioned, fined, convicted, denied approval, or refused a license by any Federal, State, or local government agency, or a government-related entity, where the action is related to the responsibilities that are commensurate with those of the financial services industry?
<input type="checkbox"/> Yes or <input type="checkbox"/> No
3. Is the applicant or any of its principals, officers, individuals serving on its Board of Directors, individuals acting as authorized signatories, or employees currently involved in a proceeding or subject to an investigation that could result, or has resulted, in suspension, fine, or disbarment by a Federal, State, or local government agency, conviction in a criminal matter, bankruptcy or denial of fidelity insurance or mortgagee's errors and omissions insurance coverage?
<input type="checkbox"/> Yes or <input type="checkbox"/> No
4. Have any mortgage insurance companies, secondary marketing agencies or warehouse lenders, or broker/dealers denied the applicant approval in the three previous fiscal years being reported? Provide the date and reasons for each denial.
<input type="checkbox"/> Yes or <input type="checkbox"/> No
5. Has the applicant been subject to any past or present action by HUD, VA, Fannie Mae, Freddie Mac, or other government-related entity to indemnify the entity against loss?
<input type="checkbox"/> Yes or <input type="checkbox"/> No
6. Is the applicant currently subject to regulatory or supervisory action by any regulatory agency? Regulatory actions include, but are not limited to, supervisory agreements, cease and desist orders, notices of determination, memorandum of understanding, unresolved audits, and investigations. Supervisory actions include, but are not limited to, the appointment of a trustee, conservator, or managing agent.
<input type="checkbox"/> Yes or <input type="checkbox"/> No
7. Has the applicant or any owner, principal, or managing executive been involved, through ownership or otherwise, with a previously defaulted Ginnie Mae issuer(s)?

Section 2. Type of FHA Lender Approval Being Requested			
Type of Applicant (Check only one box)	FHA Lender Type (Check only one box)	Participation (Check as appropriate)	FHA Loan Programs (Check as appropriate)
<input type="checkbox"/> Mortgage Broker	<input type="checkbox"/> Nonsupervised Loan Correspondent	<input type="checkbox"/> Originator	<input type="checkbox"/> Title II Single Family (203b, 203k Rehab, 234c Condo, 255 HECM Reverse Mortgage, etc.) <input type="checkbox"/> Title II Multifamily (Rental Housing, Nursing Homes, Hospitals, etc.) <input type="checkbox"/> Title I (Property Improvement and Manufactured Home Loans)
<input type="checkbox"/> Mortgage Lender <input type="checkbox"/> Mortgage Banker <input type="checkbox"/> Correspondent Lender <input type="checkbox"/> Insurance Company	<input type="checkbox"/> Nonsupervised Mortgagee <input type="checkbox"/> Nonsupervised Loan Correspondent <input type="checkbox"/> Investing Mortgagee	<input type="checkbox"/> Originator <input type="checkbox"/> Underwriter <input type="checkbox"/> Servicer <input type="checkbox"/> Holder	
<input type="checkbox"/> Bank <input type="checkbox"/> Saving Bank <input type="checkbox"/> Savings and Loan <input type="checkbox"/> Credit Union	<input type="checkbox"/> Supervised Loan Correspondent <input type="checkbox"/> Supervised Mortgagee <input type="checkbox"/> Investing Mortgagee	<input type="checkbox"/> Originator <input type="checkbox"/> Underwriter <input type="checkbox"/> Servicer <input type="checkbox"/> Holder	
<input type="checkbox"/> Federal Agency <input type="checkbox"/> State or Local Agency	<input type="checkbox"/> Government Mortgagee <input type="checkbox"/> Investing Mortgagee	<input type="checkbox"/> Originator <input type="checkbox"/> Underwriter <input type="checkbox"/> Servicer <input type="checkbox"/> Holder	
For loan correspondent applicants, provide Sponsor's Home Office FHA Lender ID Number (10 digits)		If applicant was previously a FHA approved lender:	
		Title II ID No.	Title I ID No.

Section 3 Check Type of FHA Approval Being Requested							
<p>Supplemental information required to be submitted with form HUD-11701 for verifying that an applicant meets FHA requirements for each type of FHA lender approval. References are to parts of the Title II Mortgagee Approval Handbook 4060.1, Rev-2 available at: <a href="http://hudclips.org/sub_nonhud/cgi/pdfforms/40601HB.doc">http://hudclips.org/sub_nonhud/cgi/pdfforms/40601HB.doc</a></p> <p>Check the appropriate box to indicate that each required document has been included with the application package</p>							
		<input type="checkbox"/> Nonsupervised	<input type="checkbox"/> Nonsupervised	<input type="checkbox"/> Supervised	<input type="checkbox"/> Supervised	<input type="checkbox"/> Government	<input type="checkbox"/> Investing Mortgagee
1	Cover Letter from Applicant (Stating what type of FHA lender approval is being requested. Please include TAX ID in cover letter.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Copy of nonrefundable \$1,000 Application Fee Check: (Made payable to HUD and mailed to the HUD/FHA lockbox -- PO Box 198619, Atlanta, GA 30384.) Paragraph 2-7.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Copy of State License or Registration: (or certification by senior official of applicant that the applicant is exempt from State license or registration). Paragraphs 2-3 and 3-2(A)7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	State DBA Approval, If applicable (include copy of State certificate for use of the DBA, Fictitious or Assumed Name) Paragraphs 2-4 and 3-2(A)8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Commercial Credit or Dun & Bradstreet Business Report on Applicant (include explanation of all negative items) Paragraph 3-2(A)4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	Audited Financial Report from Nonsupervised Applicant (CPA issued audit less than 12 months old with net worth calculation of at least \$63,000 for loan correspondent and \$250,000 for mortgagee with at least 20% liquidity) Paragraphs 2-5, 2-6 and 3-2(A)6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Copy of LLC Articles of Organization and Operating Agreement, if applicable (must have 2 members, minimum 10 year term and provide for succession) Paragraphs 2-2(C) and 3-3(B)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	Partnership Agreement Information, if applicable (names and TAX IDs of general partners, names and SSNs of managing general partner's officers and directors, evidence that principal business activity of managing general partner meets FHA requirements and minimum of 10 year term) Paragraphs 2-2(B) and 3-3(A)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	Pictures of office facilities (internal, external and signage), a floor plan and certification that facilities meet FHA requirements. (Must be in separate commercial space.) Paragraphs 2-11(A) and 3-2(A)9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>Section 3 Check Type of FHA Approval Being Requested</b>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>Supplemental information required to be submitted with form HUD-11701 for verifying that an applicant meets FHA requirements for each type of FHA lender approval. References are to parts of the Title II Mortgagee Approval Handbook 4060.1, Rev-2 available at: <a href="http://hudclips.org/sub_nonhud/cgi/pdfforms/40601HB.doc">http://hudclips.org/sub_nonhud/cgi/pdfforms/40601HB.doc</a></p> <p>Check the appropriate box to indicate that each required document has been included with the application package</p>		<input type="checkbox"/> Nonsupervised	<input type="checkbox"/> Nonsupervised	<input type="checkbox"/> Supervised	<input type="checkbox"/> Supervised	<input type="checkbox"/> Government	<input type="checkbox"/> Investing Mortgagee
11	Funding Program: (Evidence of a minimum of \$1 Million of Funding. A letter of credit is acceptable.) Paragraph 3-2(A)13a & 3-2(A)13b		<input type="checkbox"/>				<input type="checkbox"/>
12	Sanctions Letter. (A certification by senior officer of applicant that neither the applicant, nor any of its officers or owners have been denied licensing nor been sanctioned, suspended or debarred by any Government or Regulatory Agency) Paragraphs 2-10 & 3-2(A)14	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>
13	Quality Control Plan. (Must be plan of applicant, tailored to applicant's duties with regard to FHA loans. Detailed requirements are in Chapter 7 but it cannot be a copy of this chapter since it explains what the Quality Control Plan must cover and is a guide. Paragraphs 7-1 through 7-12, as appropriate)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14	Copy of Fidelity Bond. \$300,000 minimum covering applicant's employees and agents. HUD does not have to be the beneficiary. Paragraph 3-2(A)10		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
15	Copy of Errors & Omissions Insurance. \$300,000 minimum covering applicant's employees and agents. HUD does not have to be the beneficiary. Paragraph 3-2(A)11		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
16	Resume(s). Must show that one or more of the senior officer(s) of the applicant has at least 3 years experience in the mortgage operations that the applicant wishes to participate in. Paragraph 3-2(A)5	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
17	Credit Reports on Principals. Provide Tri-Merged or Residential Credit Reports on all officers and any owners with 25% or more ownership. Provide written explanations for all negative items. Paragraph 3-2(A)4	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>
18	Combination Sponsor/Funding Letter. A Letter from a FHA approved DE Mortgagee stating it will fund any FHA loans originated by the applicant that the DE Mortgagee underwrites. An applicant with its own funding program can provide evidence of a minimum of \$1 million of funding. Paragraphs 3-2(A)1, 3-2(A)13	<input type="checkbox"/>		<input type="checkbox"/>			

<b>Section 4. Application to Convert Existing FHA Lender Approval Type</b>						
Title II ID (10 Digits) Title I ID (10 Digits)		Current Lender Type. Check One Box <input type="checkbox"/> Nonsupervised Loan Correspondent <input type="checkbox"/> Supervised Loan Correspondent <input type="checkbox"/> Nonsupervised Mortgagee <input type="checkbox"/> Supervised Mortgagee				
<b>Check Type of Conversion Being Requested</b>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>Supplemental information required to be submitted with form HUD-11701 for verifying that an applicant meets FHA requirements for the conversion being requested. References are to parts of the Title II Mortgagee Approval Handbook 4060.1, Rev-2 available at: <a href="http://hudclips.org/sub_nonhud/cgi/pdfforms/40601HB.doc">http://hudclips.org/sub_nonhud/cgi/pdfforms/40601HB.doc</a></p> <p>Check the appropriate box to indicate that each required document has been included with the application package</p>		<input type="checkbox"/> Nonsupervised	<input type="checkbox"/> To Nonsupervised	<input type="checkbox"/> To Supervised Mortgagee	<input type="checkbox"/> To Supervised Loan	<input type="checkbox"/> To Investing Mortgagee
1	Cover Letter from Applicant (Stating what type of conversion is being requested. Please include your FHA Lender ID Number(s) in cover letter)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Copy of Nonrefundable \$300 Conversion Fee Check: (Made payable to HUD and mailed to the HUD/FHA lockbox -- PO Box 198619, Atlanta, GA 30384.) Paragraph 2-7.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3	Copy of most recent audited financial statements. If these are more than 6 months old, include management certified financial statements and computation of adjusted net worth of at least \$250,000 with at least 20% liquidity. Paragraph 6-16(E)		<input type="checkbox"/>			
4	Funding Program: (Evidence of a minimum of \$1 Million of Funding. A letter of credit is acceptable.) Paragraphs 3-2(A)13a, 3-2(A)13b and 6-16			<input type="checkbox"/>		<input type="checkbox"/>
5	Copy of Fidelity Bond. \$300,000 minimum covering applicant's employees and agents. HUD does not have to be the beneficiary. Paragraphs 3-2(A)10 & 6-16			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>Section 4. Application to Convert Existing FHA Lender Approval Type</b>					
Title II ID (10 Digits) Title I ID (10 Digits)		Current Lender Type. Check One Box <input type="checkbox"/> Nonsupervised Loan Correspondent <input type="checkbox"/> Supervised Loan Correspondent		Check One Box <input type="checkbox"/> Nonsupervised Mortgagee <input type="checkbox"/> Supervised Mortgagee	
Check Type of Conversion Being Requested					
Supplemental information required to be submitted with form HUD-11701 for verifying that an applicant meets FHA requirements for the conversion being requested. References are to parts of the Title II Mortgagee Approval Handbook 4060.1, Rev-2 available at: <a href="http://hudclips.org/sub_nonhud/cgi/pdfforms/40601HB.doc">http://hudclips.org/sub_nonhud/cgi/pdfforms/40601HB.doc</a>			Nonsupervised <input type="checkbox"/> To	To <input type="checkbox"/> To	To Supervised Mortgagee <input type="checkbox"/> To Supervised
Check the appropriate box to indicate that each required document has been included with the application package					
6	Copy of Errors & Omissions Insurance. \$300,000 minimum covering applicant's employees and agents. HUD does not have to be the beneficiary. <i>Paragraphs 3-2(A)11 &amp; 6-16</i>			<input type="checkbox"/>	<input type="checkbox"/>
7	Combination Sponsor/Funding Letter. A Letter from a FHA approved DE Mortgagee stating it will fund any FHA loans originated by the applicant that the DE Mortgagee underwrites. An applicant with its own funding program can provide evidence of a minimum of \$1 million of funding. <i>Paragraphs 3-2(A)1, 3-2(A)13 and 6-16</i>			<input type="checkbox"/>	<input type="checkbox"/>
8	Certification that all FHA Insured Mortgages held or serviced have been transferred to another FHA mortgagee that is approved to hold and service FHA insured mortgages. <i>Paragraph 6-16</i>			<input type="checkbox"/>	<input type="checkbox"/>
If the conversion being requested is from supervised to nonsupervised lender or conversion of an existing investing lender, please attached all items listed for the approval type being requested as listed in section 3 of this form. <i>Paragraphs 6-16(C) and 6-16(G)</i>					

<b>Section 5 Certification by All Applicants</b>	
The undersigned agrees I am authorized to execute this application on behalf of the applicant and certify that the applicant, upon being approved as a FHA lender, will comply with the all provisions of the HUD regulations and the requirements of the Secretary of HUD with regard to using and maintaining its FHA lender approval.	
Name:	Title: (must be President, Vice President, Partner or Manager Partner)
Signature: _____	Date: _____

<b>Section 6 Payment of FHA Lender Application Fee (Nonrefundable)</b>	
Fee must be paid by certified or official check payable to: Department of Housing and Urban Development. <i>Paragraph 2-7.</i>	<input type="checkbox"/> \$1,000 New Approval Fee <input type="checkbox"/> \$ 300 Conversion Fee
Attach the check to a copy of first 4 pages of the applicant's application form 11701(without any exhibits) and mail it to HUD's Lockbox address shown to the right.	Dept of HUD P.O. Box 198619 Atlanta, GA 30384
<b>Do not mail your full application and its exhibits to this address because it will delay its receipt in Washington, DC by at least 30 days. The address in Atlanta is for fee payment only.</b>	

<b>Section 7: Submission of Application Form 92001-A and Exhibits to FHA for Processing and Approval</b>	
Send the executed application form 92001-A and all required exhibits to one of the following addresses.	
<b>US Mail:</b>	<b>Overnight Delivery</b>
Dept of HUD FHA Lender Approval & Recertification Division	Dept of HUD FHA Lender Approval & Recertification Division

451 7th Street, S.W., Room B133/P3214  
Washington, DC 20410

490 L'Enfant Plaza East, SW, Suite 3214  
Washington, DC 20024

Public Reporting Burden for this collection of information is estimated to average 2.0 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The information requested on this form is required by 24 CFR Part 202, HUD Handbooks 4060.1, 4700.2. The information collected assists FHA in determining which lenders should be approved to participate in the FHA single and multifamily insurance programs. It is used to help FHA minimize its risk in insuring singlefamily and multifamily mortgages. Applicants are not required to respond to this collection of information unless a currently valid approved OMB control number is displayed on the form.

**Privacy Act Statement.** Names and Social Security Numbers are requested in order for the Department to obtain positive identification of the applicant's officers, directors, stockholders and employees who have authority to obligate the applicant. The information requested will be used solely to determine the eligibility of the individuals to participate in the Department's mortgage insurance programs. The Department is authorized to request this information by Executive Order 9397 and it will not be disclosed outside the Department without prior consent except as required or permitted by law. The Social Security Numbers are provided to HUD on a voluntary basis. Failure to provide this information could cause delay in processing of the applications. While no assurances of confidentiality are pledged to respondents, HUD generally discloses this data only in response to a Freedom of Information Act request.