## Application for Federal Housing Administration (FHA) Loan Correspondent Approval U.S. Department of Housing and Urban Development

OMB Approval Number 2502-0005 exp. 05/31/2012

Section 1: Applicant Information		01.50	ar Bovolopinone							
Name:										
DBA name(s), if applicable. Use sep	parate sheet	for a	any additional DBAs							
TAX ID:		Date Incorporated, Organized or Chartered:								
Geographic Address			Mailing Address (if different)					Fiscal Year End (Month):		
									a (Month).	
						_				
County:		Phone:				F	Fax:			
Web Site:		еМа								
Contact Name Person		еМа	all				hone	Fax		
Affiliation with Home Builder		Min	nority/Women-Own	ed B	usine	255	(Ontional)			
Yes No If yes,		Minority-Owned								
Name:		Women-Owned								
Tax ID:			Minority-Owned/Wo	omen	-Owr	ned				
All Applicants must provide the following			for all officers, director	s, par	tners,	ma				
indicate which officer will be in charge of sheet for any additional persons or ownir		y ope	erations of the applican	it's pla	anned	H	A operations. A	ttach	a separate	
			le (If Applicable)					ecurity or Percer		
			Charg			e? TAX ID Number Own			Ownership	
FHA Loan Correspondent Types: P	lease read t	he fo	llowing to determine	whice	ch ap	pro	val type to app	oly fo	r.	
			-							
<ul> <li>Nonsupervised Loan Correspon apply for which allows them to orig</li> </ul>										
and mortgage lenders who only w	ant to origina	ate sł	hould apply for this t	ype c	of app	ro۱	∙al.			
<ul> <li>Supervised Loan Correspondentype of approval if they only want to</li> </ul>								ıld a	pply for this	
type of approval if they only want t	o originate i	ПД	Title if Single family i	oans	anu	Oi	ride ribaris.			
Section 2: FHA Loan Correspon	dent Appr	oval								
FHA Approval Type		T:+lo	FHA					~~	)ro aro mo o)	
Nonsupervised Loan Corresponde	ent		e II Single Family (Fo				•	_	- ,	
Supervised Loan Correspondent			itle I (Property Impro							
Supervised Applicants Examined and			-	10 Digit FHA ID Number of Sponsor				ponsor:		
Federal Reserve System	•	t Insurance Corp.	Title II:							
Office of Thrift Supervision	redit	Union Admin.	Title I:							
Other:										

Sec	tion	3: List of Supplemental Information to be Submitted with Application Form	920	01-	LC		
Supplemental information required to be submitted with form HUD-92001-LC to demonstrate that an applicant meets FHA requirements for approval. Details about each item are in HUD Handbooks 4060.1 and 4700.2, subsequent Mortgagee Letters and Title I Letters which are available at: <a href="http://www.hud.gov/offices/adm/hudclips/">http://www.hud.gov/offices/adm/hudclips/</a>						Supervised Loan Correspondent	
Check the appropriate box to indicate that each required document has been included with the application package						ondent	sed
1	Sta	te License or Registration					
2		DBA Approval(s), If applicable				L	
3		mmercial Credit or Dun & Bradstreet Business Report on Applicant					
4		dited Financial Report on Applicant					
5		C Articles of Organization and Operating Agreement, if applicable.					
6		tnership Agreement Information, if applicable.					
7		dence of Office Facilities			_		
8		ality Control Plan			_		
9		sume(s)					
10		edit Reports on Principals			_		_
11	Coi	mbination Sponsor/Funding Letter					
ackr expl	nowle anati licatio	4: Certifications and Acknowledgments: Check the appropriate box next to each edgment. You must provide a detailed explanation for any certification where you mark the on must be on the applicant's letterhead, and must be dated and signed by the same person.  rtify I am a corporate officer and/or principal/owner of the above-named applicant with	"No	" bo	X.	The	Э
	the ackr	authority to legally bind the applicant and to execute these certifications and nowledgments on behalf of the applicant.			ı		
2.	disc	rtify the applicant is not subject to any assessments or contingent liabilities not losed in its financial statements.	Yes		N		
3.		rtify required application fee has been paid.	Yes	L	N		ᆚ_
4	dire auth	rtify that neither the applicant nor any of its principals, partners, officers, individuals serving ctors, managers, supervisors, loan originators, loan processors, loan underwriters, individual norized signatories or other employees are:  Suspended, debarred, under a limited denial of participation (LDP), or otherwise restricted under Part 25 of Title 24 of the Code of Federal Regulations, 2 Code of Federal Regulations, Part 180 as implemented by Part 2424, or any successor regulations to such parts, or under similar provisions of any other Federal or State		actii	ng a	as _	]
	(b)	agencies; Under indictment for, have been convicted of, or charged with a felony offense that reflects adversely upon the applicant's integrity, competence or fitness to meet the responsibilities of a FHA approved lender;	Yes		N	0 [	
	(c)	Subject to unresolved findings contained in a Department of Housing and Urban Development or other governmental audit, investigation, or review;	Yes		N	0 [	
	(d)	Engaged in business practices that do not conform to generally accepted practices of prudent lenders or that demonstrate irresponsibility, including, but not limited to, failure to satisfy debts due and owing to FHA/HUD, or associating or affiliating, for the purpose of conducting mortgage business, with a person or entity previously sanctioned/fined by HUD;	Yes		N.	ο [	
	(e)	Convicted of, or has pled guilty or <i>nolo contendre</i> ("no contest") to, a felony related to participation in the real estate, mortgage loan, or financial services industry—  (1) During the 7-year period preceding the date of the application for licensing and registration; or  (2) At any time preceding such date of application, if such felony involved an act of	Yes		N	0 [	

		fraud, dishonesty, breach of trust, or money	y laundering;					
	(f)	In violation of provisions of the S.A.F.E. Mortgage		of 2008 (12 U.S.C.	Yes No			
		5101 et seq.) or any applicable provision of state						
	(g)	In violation of any other requirement established	Yes No					
	(h)	Currently or presently suspended, terminated, de			Yes No			
		denied approval, or subject to a license/approval						
		local government agency, or a government-relate						
		to the responsibilities that are commensurate with	n those of the fir	nancial services				
		industry; and						
	(i)	Currently involved in a proceeding or subject to a			Yes No			
		has resulted, in suspension, fine, debarment, or o						
		local government agency, conviction in a criminal		ptcy or loss of fidelity				
_		insurance or errors and omissions insurance cov			\/ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
5.		tify that no mortgage insurance companies, secon			Yes    No			
		lers, or broker/dealers have denied the applicant a	ast three years from					
		date of these certifications. tify the applicant, its principals, partners, officers, a	and/ar directors	have not been	Voc. No.			
6.			Yes  No					
		ect to any past or present action by HUD, VA, Fan ernment-related entity in which there has been a re						
		$\epsilon$ mnify the entity against loss.	equest to repure	mase a man or to				
7.		tify the applicant is not currently subject to, previous	uely been or is	nronocod for	Yes No			
٠.		llatory or supervisory action by any regulatory enti						
		not limited to, supervisory agreements, cease and						
		ermination, notices of proposed actions, formal me						
		noranda of understanding, unresolved audits, revo		9 1				
		stigations. Supervisory actions include, but are no						
		tee, receiver, conservator, or managing agent.		эррэминэн эн эн				
8.		knowledge on behalf of the applicant, its continuin	g obligation to r	notify HUD's Lender	Yes			
		roval and Recertification Division, in writing, within						
	info	mation or documentation provided in connection v	vith this applicat	tion for approval while				
	the 1	this application is pending review.						
9.		tify that neither the applicant nor any of its owners			Yes 🔛 No 🔙			
	supervisors have been involved, through ownership or otherwise, with a previously							
		ulted Ginnie Mae issuer(s), an FHA-approved mo						
		Mortgagee Review Board, and/or an entity subject	to a civil or crin	ninal action by federal				
		tate law enforcement.	1 24 2		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
10.		rtify that, upon the submission of this application, a			Yes			
		nsurance or request for insurance benefits, the app						
		irements of the Secretary of Housing and Urban E						
		limited to, the National Housing Act (12 U.S.C. § 1						
		handbooks, mortgagee letters, and Title I letters nationing its FHA lender approval.	and policies wil	in regard to using and				
11			a obligation to n	otify HLID's Londor	Voc			
11.	L. I acknowledge on behalf of the applicant, its continuing obligation to notify HUD's Lender Yes Approval and Recertification Division, in writing, within 10 days of issuance of any notice (or							
	proposed notice) of violation, revocation, sanction, suspension, or any other administrative							
	action/proceeding initiated by a state or federal regulatory entity.							
I hereby certify that all of the information I have provided on this form and in any accompanying								
documentation is true and accurate to the best of my knowledge and belief. I acknowledge that if I								
knowingly have made any false, fictitious, or fraudulent statement, representation, or certification on this								
form or on any accompanying documents, I, as well as the applicant, may be subject to administrative								
action, as well as civil and criminal penalties, including fines and/or imprisonment, under applicable federal								
		uding but not limited to 18 U.S.C. §§1001, 1010	, and 1012, and	l '				
_31 L	J.S.C	. §§3729 and 3802.	ı					
Nan	ne:		Title:					
			I					
Sigr	ature	):		Date:				

Send the executed application form 92001-LC and all required exhibits to one of the following addresses.

US Mail
Dept of HUD
FHA Lender Approval & Recertification Division
451 7th Street, S.W., Room B133/P3214
Washington, DC 20410

Overnight Delivery
Dept of HUD
FHA Lender Approval & Recertification Division
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 Handbook 4060.1 or HUD Handbook, 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 single family 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

Warning: It is a crime to knowingly make false statements to the United States on this or any other similar form. Penalties upon conviction can include a fine and imprisonment. For details, see: Title 18 U.S. Code, Sections 1001 and 1010.