

**Screen Shots of the
FHA Lender Approval Application System using
HUD's Lender Electronic Assessment Portal (LEAP)
The web site is at: <https://www5.hud.gov/FHALender/>**

THURSDAY, JANUARY 19, 2012

HUD.GOV
U.S. Department of Housing and Urban Development
Secretary Shaun Donovan

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User Login

This application is only for lender applicants seeking new FHA approval.
If you are applying for both Title I and Title II approval, you will apply for both on the same application.
If you are an existing FHA lender seeking to expand your approval to either Title I or Title II, you must submit a paper application at this time.
For all other activities, please visit HUD's comprehensive [Lenders Page](#) for more links.

Do not use the forward and back buttons on your browser. Instead you may navigate from tab to tab with the Back and Continue arrows found at the bottom of each screen.

User ID *

Password *

Already Registered.

New applicant. [Register Here!](#)

New user for an existing application. [Register Here!](#)

[Forgot your password. Click Here!](#)

[Need to change your password. Click Here!](#)

User Login

User Information

Salutation

First Name *

Middle Initial

Last Name *

Phone - n

Fax -

Email *

Verify Email *

Job Title

Time Zone

Log-in Information
All passwords must contain an uppercase letter, lowercase letter, special character, and be at least 8 characters long.

User ID *

Password *

Verify Password *

User Information

Company Information

Company Name *

Company URL

Tax ID - *

Geographic Address

Address Line 1 *

Address Line 2

City *

County

State ▼ *

Zip *

Phone - - * Extn

Fax - - *

Check here if mailing address is the same?

Mailing Address

Address Line 1 *

Address Line 2


City *

County


State ▼ *

Zip * [Validate Address](#)


Company Information



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Do you agree with the terms of this license agreement?

An asterisk (*) denotes a required field
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Usage Terms

TUESDAY, SEPTEMBER 13, 2011

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Instructions

New FHA Lender Approval

Navigation Instructions

The FHA Online Application is organized into tabs that begin with Instructions and end with E-Signature. You may navigate from tab to tab with the Back and Continue arrows found at the bottom of each screen. You must complete all required information on each tab before you are able to proceed to the next. You may go back to a tab previously completed by clicking on the tab name. The information on each tab will be saved when you navigate to the next tab. Partially completed applications can be resumed at a later time by logging in with your User Name and Password.


 Continue

An asterisk (*) denotes a required field


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Instructions

Instructions **General** Contact Address Lender Type Officers & Owners Attachments Certifications Summary Payment E-Signature

General Information

Company Name	Jones Lending *
DBA (Doing Business As)	<input type="text"/> (if applicable)
Tax ID	49 - 8493894*
NMLS ID	3948394
Date Company Established	February 25 1997 *
Fiscal Year End Month	February *
Minority/Women-Owned Business	N/A *
Nonprofit Entity? (Exempt from Application Fee)	<input type="radio"/> Yes <input checked="" type="radio"/> No*
Affiliation with Home Builder (Y/N)	<input checked="" type="radio"/> Yes <input type="radio"/> No*
Builder's Name	KB Homes *
Builder's Tax ID	93 - 277223 *


 Back Continue

General Information

Instructions	General	Contact	Address	Lender Type	Officers & Owners	Attachments	Certifications	Summary	Payment	E-Signature
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Primary Contact

This should be FHA's primary contact for all inquiries related to this application for approval

I am the primary contact

First Name *

Middle Initial

Last Name *

Phone * Extn

Fax

Email *

Verify Email *

Primary Contact

Geographic Address

Address Validation not done.

Address Line 1 *

Address Line 2

State *

City *

County

Zip *

Phone * Extn

Fax *

Check here if mailing address is the same

Mailing Address

Address Line 1 *

Address Line 2

State *

City *

County

Zip *

Validate Address

Addresses

Instructions | General | Contact | Address | **Lender Type** | Officers & Owners | Attachments | Certifications | Summary | Payment | E-Signature

Lender Type, Functions and Loan Programs

FHA Lender Type

Supervising Agency

Other Agency Name

Lender Functions (check all that apply)

Originate/Underwrite

Service

Own

If applicant is approved for both Title II and Title I loan programs, they will receive two FHA Lender ID numbers, one for Title II and a second for Title I.

FHA Loan Programs (check all that apply)

Title II Single Family (Forward and Reverse Mortgage Programs)

Title II Multifamily (Rental Housing, Nursing Homes, Hospitals, etc.)

Title I (Property Improvement and Manufactured Home Loans)

Lender Type, Functions and Loan Programs

Officers & Owners Information

List all of officers who will be directly involved in managing, overseeing, or conducting the FHA business of the applicant. For details on ownership reporting requirements reference materials are available [here](#). For each entry, select the appropriate category (Individual or Company/Corporation) and complete the section that applies.

Individual (Officer and/or Owner) Company/Corporation (Owner)

Salutation:

First MI Last

Individual Name

Job Title

SSN

Officer In Charge

Email

Verify Email

Percent Ownership

Company Name

Tax Identification Number

Percent Ownership

Officer or Owner	In Charge	Title	SSN / Tax ID	Email	Percent Ownership
Mr. Robert Jones	Y	Chief Executive Officer	223-55-9832	mapatterson@kpmg.com	32

Owners and Officers Information

List all of officers who will be directly involved in managing, overseeing, or conducting the FHA business of the applicant. For details on ownership reporting requirements, reference materials are available [here](#). For each entry, select the appropriate category (Individual or Company/Corporation) and complete the section that applies.

Individual (Officer and/or Owner) **Company/Corporation (Owner)**

Salutation:

Individual Name: First MI Last *

Job Title: *

SSN: - - *

Officer In Charge:

Email: *

Verify Email: *

Percent Ownership: % *

Company Name: *

Tax Identification Number: - *

Percent Ownership: % *

Officer or Owner	In Charge	Title	SSN / Tax ID	Email	Percent Ownership
Gerry Good	Y	President	230-58-0000	cheriene.g.floyd@hud.gov	75
Good Mortgage Company			99-1234909		25

Adding an Owner or Officer

Instructions | **General** | **Contact** | **Address** | **Lender Type** | **Officers & Owners** | **Attachments** | **Certifications** | **Summary** | **Payment** | **E-Signature**

Required Attachments

All documents listed below are required prior to submitting the application. Please note that you may need to include additional items, such as DBA Approvals, Partnership Agreement Information, or LLC Articles of Organization. For more information on any attachments or other requirements, reference materials are available [here](#).

All documents listed below are required prior to submitting the application.

1. Required Financial Statements
2. Errors & Omissions Insurance
3. Fidelity Bond
4. Quality Control Plan

Attachment Type:

Document Type	Attached File	Operation
Required Financial Statements	C:\Documents and Settings\c55175\Desktop\TEST.docx	Remove
Errors & Omissions Insurance	C:\Documents and Settings\c55175\Desktop\TEST.docx	Remove
Fidelity Bond	C:\Documents and Settings\c55175\Desktop\TEST.docx	Remove
Quality Control Plan	C:\Documents and Settings\c55175\Desktop\TEST.docx	Remove

Required Attachments

Instructions	General	Contact	Address	Lender Type	Officers & Owners	Attachments	Certifications	Summary	Payment	E-Signature
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Certifications and Acknowledgements

Check the appropriate button next to each certification and/or acknowledgment. You must provide a detailed explanation for any certification where you mark the "No" box. The explanation must be on the applicant's letterhead, and must be dated and signed by the same person who signs the application.

- I certify I am a corporate officer and/or principal/owner of the above-named applicant with the authority to legally bind the applicant and to execute these certifications and acknowledgments on behalf of the applicant. Yes No
- I certify the applicant is not subject to any assessments or contingent liabilities not disclosed in its financial statements. Yes No
- I certify that neither the applicant nor any of its principals, partners, officers, individuals serving on its board of directors, managers, supervisors, loan originators, loan processors, loan underwriters, individuals acting as authorized 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 agencies; Yes No
 - Under indictment for, have been convicted of, or charged with a felony offense that reflects adversely upon the applicants integrity, competence or fitness to meet the responsibilities of a FHA approved lender; Yes No
 - Subject to unresolved findings contained in a Department of Housing and Urban Development or other governmental audit, investigation, or review; Yes No
 - 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 business with HUD or its entities. Yes No

- I certify the applicant, its principals, partners, officers, and/or directors, have not been subject to any past or present action by HUD, VA, Fannie Mae, Freddie Mac, or other government-related entity in which there has been a request to repurchase a loan or to indemnify the entity against loss. Yes
- I certify the applicant is not currently subject to, previously been, or is proposed for regulatory or supervisory action by any regulatory entity. Regulatory actions include, but are not limited to, supervisory agreements, cease and desist orders, notices of determination, notices of proposed actions, formal memoranda of understanding, informal memoranda of understanding, unresolved audits, revocation of license(s) and investigations. Supervisory actions include, but are not limited to, the appointment of a trustee, receiver, conservator, or managing agent. Yes
- I acknowledge on behalf of the applicant, its continuing obligation to notify HUDs Lender Approval and Recertification Division, in writing, within 5 days of any change to the information or documentation provided in connection with this application for approval while this application is pending review. Yes
- I certify that neither the applicant nor any of its owners, principals, officers, managers or supervisors have been involved, through ownership or otherwise, with a previously defaulted Ginnie Mae issuer(s), an FHA-approved mortgagee that was subject to action by the Mortgagee Review Board, and/or an entity subject to a civil or criminal action by federal or state law enforcement. Yes
- I certify that, upon the submission of this application, and with its submission of each loan for insurance or request for insurance benefits, the applicant has and will comply with the requirements of the Secretary of Housing and Urban Development, which include, but are not limited to, the National Housing Act (12 U.S.C. § 1702 et seq.) and, HUDs regulations, FHA handbooks, mortgagee letters, and Title I letters and policies with regard to using and maintaining its FHA lender approval. Yes
- I acknowledge on behalf of the applicant, its continuing obligation to notify HUDs Lender 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. Yes

You must have no validation errors before progressing to the next screen.
 If there are any errors detailed below you must go back in the application and address them.
 You may re-run the validate check by clicking the button below.

Certifications and Acknowledgements

Instructions	General	Contact	Address	Lender Type	Officers & Owners	Attachments	Certifications	Summary	Payment	E-Signature
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Summary

Please review all information below for accuracy. Changes to any section can be made by clicking the Edit link or selecting the appropriate tab at the top of the page.

General Edit

Company Name : Jones Lending	DBA :
Tax ID : 49-8493894	Date Company Established : 25-February-1997
NMLS ID : 3948394	Minority/ Women-Owned Business : N/A
Non-profit or Government Entity? (Exempt from Application Fee) : No	Fiscal Year End Month : February
Affiliation with Home Builder (Y/N) : Yes	Builder's Tax ID : 93-8277223
Builder's Name : KB Homes	

Primary Contact Edit

Full Name : Robert Jones
Phone : 324 - 839 - 8938 Ext Fax : 349 - 839 - 8493
Email : mapatterson@kpmg.com

Geographic Address

Address Line1 : 2001 M St NW
Address Line2 :
State : DC
City : Washington
County : District Of Columbia
Zip Code : 20036
Phone : 3498345345 Ext
Fax : 3498398593

Mailing Address Edit

Address Line1 : 2001 M St NW
Address Line2 :
State : DC
City : Washington
County : District Of Columbia
Zip Code : 20036

Officers And Owners Edit

1. Robert Jones - Incharge:Y Title:Chief Executive Officer Ownership:32%

Summary of Application

Instructions	General	Contact	Address	Lender Type	Officers & Owners	Attachments	Certifications	Summary	Payment	E-Signature
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Payment

Your Application Number is 12892
 Your Tracking ID is 1-BO3Y
 The amount you are required to pay is \$1000.00
 The site is being redirected to pay.gov for payment processing. Click to Agree

Payment

System Message

- The system has populated the Payment Date with the next available payment date.

Online Payment
[Return to your originating application](#)

Step 1: Enter Payment Information 1 | 2

Pay Via Bank Account (ACH) [About ACH Debit](#)

Required fields are indicated with a red asterisk *

Account Holder Name: *

Payment Amount: \$1,000.00

Account Type: *

Routing Number: *

Account Number: *

Confirm Account Number: *

Check Number:

Routing Number	Account Number	Check Number
:0 26 94 6 7 6 3:	9 2 4 3 7 6 7 3 9 0	1 2 3 4

Payment Date: 01/20/2012

Select the "Continue with ACH Payment" button to continue to the next step in the ACH Debit Payment Process.

Payment Details in pay.gov system

Online Payment
[Return to your originating application](#)

Step 2: Authorize Payment 1 | 2

Payment Summary [Edit this information](#)

Account Holder Name: John Smith

Payment Amount: \$1,000.00

Account Type: Business Checking

Routing Number: 041201936

Account Number: *****2248

Check Number: 38074

Payment Date: 01/20/2012

Email Confirmation Receipt

To have a confirmation sent to you upon completion of this transaction, provide an email address and confirmation below.

Email Address:

Confirm Email Address:

CC: Separate multiple email addresses with a comma

Authorization and Disclosure

Required fields are indicated with a red asterisk *

I agree to the authorization and disclosure language. *

Authorization and Disclosure--Consumers and Businesses

The debit transaction(s) to which you are agreeing are handled on behalf of Federal agencies by "Pay.gov," which consists of services offered by the U.S. Treasury Department's Financial Management Service. As used in this document, "we" or "us" refers to the Financial Management Service and its agents and contractors operating Pay.gov. "You" refers to the end-user reading this document and agreeing to it prior to engaging in a debit transaction.

I. Consumers

A. Authorization

You acknowledge that you have read and understand the consumer disclosure language and authorize the Federal Reserve financial institution of Cleveland to debit the named financial institution account. This authorization is to remain in full force and effect until we have received notification of its termination in such time and in such manner as to afford Pay.gov a reasonable opportunity to act on it, or unless otherwise terminated for any reason by Pay.gov.

[View Authorization and Disclosure in a separate window.](#)

Press the "Submit Payment" Button only once. Pressing the button more than once could result in multiple transactions.

Note: Please avoid navigating the site using your browser's Back Button - this may lead to incomplete data being transmitted and pages being loaded incorrectly. Please use the links provided whenever possible.

Payment Authorization

Instructions | General | Contact | Address | Lender Type | Officers & Owners | Attachments | Certifications | Summary | Payment | **E-Signature**

E-Signature

You are currently logged in as Robert Jones. The certification and electronic signature below must be completed by a senior officer, who must also be listed on the Officers & Owners tab of this application. The senior officer may need to create a new user for this application in order to certify and electronically sign.

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 law, including but not limited to 18 U.S.C. §§1001, 1010, and 1012, and 31 U.S.C §§3729 and 3802.

Date: 19-JAN-2012
 Authorizing Person:

E-Signature

Instructions General Contact Address Lender Type Officers & Owners Attachments Certifications Summary Payment **E-Signature**

E-Signature

You are currently logged in as Robert Jones. The certification and electronic signature below must be completed by a senior officer of this application. The senior officer may need to certify and electronically sign.

I hereby certify that all of the accompanying documentation is true and a knowledge that if I knowingly have made any false or certification on this form or on any accompanying subject to administrative action, as well as imprisonment, under applicable federal law, including 12, and 31 U.S.C. §§3729 and 3802.

Date: 19-JAN-2012
Authorizing Person: Robert Jones

Back Continue

Windows Internet Explorer

Are you sure do you want to submit application?

OK Cancel

Submit Button