

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. Public reporting burden for this collection of information is estimated to average 30 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The obligation to respond to this collection is mandatory (include legal cite)/required to obtain or retain benefit (include legal citation) voluntary. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Housing and Urban Development, Office of the Chief Data Officer, Attention: Departmental Clearance Officer, 451 7th Street SW Room, Washington, DC 20410, or email: PaperworkReductionActOffice@hud.gov

The information requested on this form is required by Sec. 306(g) of the National Housing Act, or by Ginnie Mae Handbook 5500.3. The information collected assists Ginnie Mae in determining which Issuers should be approved to participate in the Ginnie Mae Digital Collateral Program. It is used to help Ginnie Mae minimize its risk. Applicants are not required to respond to this collection unless a currently valid approved OMB control number is displayed on the form.

Instructions: Pursuant to Section 2110.00 of the Ginnie Mae Digital Collateral Guide (“eGuide”), an Issuer must apply for and receive Ginnie Mae approval to act as an eIssuer in Ginnie Mae’s Digital Collateral Program by submitting this eIssuer Application to Participate in the Digital Collateral Program (“Application”), including all corresponding attachments, via email to DCPA@hud.gov. The Application must be signed by an agent of the Issuer identified on the most recent Form HUD 11702 submitted to Ginnie Mae. Please note that any capitalized terms, abbreviations, acronyms, or initialisms contained in this Application shall have the meaning provided in the Glossary of the eGuide or the MBS Guide, unless otherwise defined.

Section A. General Information

1a. Issuer Organization Name ("Applicant")	<input type="text"/>	35	2a. Applicant Contact Person Name	<input type="text"/>
		36		
1b. Issuer Doing Business As Name (if applicable)	<input type="text"/>	37	2b. Applicant Contact Person Phone Number	<input type="text"/>
		38		
		39		
1c. Ginnie Mae Issuer #	<input type="text"/>	40	2c. Applicant Contact Person Email Address	<input type="text"/>

Application continues on next page

Section B. Issuer Information

1a. Please provide the name of the Applicant's Eligible eNote provider pursuant to the requirements set forth in Section 2500.00 of the eGuide. If the Applicant would like to deliver eNotes originated by another lender in addition to or in lieu of eNotes originated by the Applicant, please enter the word "Aggregator" and provide the name of the provider(s) used by the third-party lender(s).

1b. Please provide the name of the Applicant's Qualified eClosing System provider pursuant to the requirements set forth in Section 2400.00 of the eGuide. If the Applicant would like to deliver eNotes originated by another lender in addition to or in lieu of eNotes originated by the Applicant, please enter the word "Aggregator" and provide the name of the provider(s) used by the third-party lender(s).

1c. Please provide the name of the Applicant's Qualified eVault provider pursuant to the requirements set forth in Section 2600.00 of the eGuide. If the Applicant will utilize the eCustodian's eVault for purposes of meeting this requirement, please enter "eCustodian's Qualified eVault" below and identify the intended eCustodian in Section C of this Application.

2a. Please provide the Applicant's MERS® Org ID that corresponds with its active MERS® System Membership and MERS® eRegistry Participant status, pursuant to the requirements set forth in Section 2160.00 of the eGuide.

2b. Please provide the total number of production eNotes registered on the MERS® eRegistry by the Applicant as of the Application Date.

2c. Does the Applicant have any active, uncured, or unremediated violations of the MERS® System Rules of Membership? If "Yes", please provide a description of each violation and its status, either below or in a separate attachment to this Application.

Yes No

3a. Please provide a general description of the Applicant's experience, staff, processes, and systems as applicable to fulfilling the eServicing Requirements and Procedures described in Sections 2170.00 and 6000.00 of the eGuide, either below or in a separate attachment to this Application.

3b. Please provide the names, titles, contact information (phone number and email), and relevant experience of the key personnel that the Applicant will dedicate to this initiative to collaborate with Ginnie Mae during the initial phases of the Digital Collateral Program as described in Section 2300.00 of the eGuide, either below or in a separate attachment to this Application.

3c. Please provide a general description of the process by which the Applicant will ensure that it does not exceed the number of eMortgages that may be securitized during the course of the Digital Collateral Program pursuant to the eMortgage Issuance Authority described in Section 4000.00 of the eGuide, either below or in a separate attachment to this Application.

Section C. eCustodian Requirement

1a. Please provide the name of the Applicant's intended eCustodian pursuant to Section 2180.00 of the eGuide.

1b. Is the Applicant's Submission of this Application a joint application with its intended eCustodian, as described in Section 2180.00 of the eGuide? If yes, applications for both the elssuer and eCustodian still need to be completed and submitted.

Yes No

Section D. Applicant Certification

I 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 understand that if I knowingly have made any false, fictitious, or fraudulent statement, representation, or certification on this form or on any accompanying documents, I may be subject to civil and criminal penalties, including fines and/or imprisonment, under applicable federal law, including but not limited to 18 U.S.C. 287 §§1001, 1010, and 1012, 1014 and 31 U.S.C. §§3729 and 3802.

Applicant Signature:

Date:

Name:

Title:

The knowing submission of a false, fictitious, or fraudulent certification may be subject to criminal and civil penalties, including confinement for up to 5 years, fines, and civil penalties. 12 U.S.C. § 1723i, 18 U.S.C. §§ 287, 1001 and 31 U.S.C. § 3729.