



It's the Intellectual Capital™

# Warehouse Funding Application

## Emerging Mortgage Bankers

The undersigned Applicant(s) hereby request(s) Fidelity Bank to grant a mortgage warehouse facility.

### Applicant Information

Company Legal Name \_\_\_\_\_ Amount Requested \$ \_\_\_\_\_  
 Doing Business As (if applicable) \_\_\_\_\_ Tax ID Number \_\_\_\_\_  
 Address \_\_\_\_\_ Years in Business \_\_\_\_\_ State of Incorporation \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Business Type:  Corporation  Partnership  LLC  LLP  
 Contact Person regarding Application \_\_\_\_\_  Other: \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_  
 Last year's origination (\$ of loans closed) \$ \_\_\_\_\_ Units \_\_\_\_\_ This year's originations (thru end of last month) \$ \_\_\_\_\_ Units \_\_\_\_\_  
 NMLS #: \_\_\_\_\_ MERS Org ID #: \_\_\_\_\_ Agency Approvals:  FNMA  FHLMC  GNMA  FHA  VA  USDA

### Licensing Information

Broker Company(?) Name \_\_\_\_\_ Contact Person \_\_\_\_\_  
 Phone \_\_\_\_\_ Email \_\_\_\_\_ SSN \_\_\_\_\_ Type of License \_\_\_\_\_

### Ownership Information

Fidelity Bank requires the following information from each shareholder, partner, or member owning 10 percent or more of the Applicant. *Attach additional pages if necessary.*

Name _____	Name _____
Title _____ Percent Ownership _____%	Title _____ Percent Ownership _____%
Home Address _____	Home Address _____
City _____ State _____ Zip _____	City _____ State _____ Zip _____
Phone _____ Email _____	Phone _____ Email _____
Name _____	Name _____
Title _____ Percent Ownership _____%	Title _____ Percent Ownership _____%
Home Address _____	Home Address _____
City _____ State _____ Zip _____	City _____ State _____ Zip _____
Phone _____ Email _____	Phone _____ Email _____

### Other Financial Institutions

Does the Applicant or any affiliate or parent subsidiary of the Applicant have a warehouse facility or a business line of credit with any other financial institution:  
*Attach additional pages if necessary.*  Yes  No

▶ If "YES", please complete the following:

Financial Institution Name _____	Financial Institution Name _____
City _____ State _____ Zip _____	City _____ State _____ Zip _____
Financial Institution's Phone _____	Financial Institution's Phone _____
Loan Officer Name _____	Loan Officer Name _____
Loan Officer Email _____	Loan Officer Email _____
<input type="checkbox"/> Warehouse Line of Credit <input type="checkbox"/> Additional Business Line of Credit	<input type="checkbox"/> Warehouse Line of Credit <input type="checkbox"/> Additional Business Line of Credit
Amount \$ _____ Date Approved _____ Exp. Date _____	Amount \$ _____ Date Approved _____ Exp. Date _____

▶ If "NO", are there any immediate plans to acquire another warehouse facility over and above the request at Fidelity Bank:  Yes  No

### Other Correspondent Relationships

List any correspondent relationships

Correspondent Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Contact Name \_\_\_\_\_ Email \_\_\_\_\_ Financial Institution's Phone \_\_\_\_\_  
 Volume for Last Years \$ \_\_\_\_\_ Units \_\_\_\_\_ Delegated  Yes  No Date Approved \_\_\_\_\_

Revised 12/2018

### Senior Company Officers (mandatory)

Please fill in the following information for the three most Senior Company Officers:

Name _____	Title _____	Phone _____
Home Address _____	City _____	State _____ Zip _____
Name _____	Title _____	Phone _____
Home Address _____	City _____	State _____ Zip _____
Name _____	Title _____	Phone _____
Home Address _____	City _____	State _____ Zip _____

### Fulfillment Provider

Fulfillment Provider Name \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

### Wholesale Relationships

Does the Applicant have any other wholesale relationships?  Yes  No

▶ If "YES", please complete the following:

Financial Institution Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Loan Officer Name \_\_\_\_\_ Financial Institution's Phone \_\_\_\_\_

Volume for Last 2 Years \_\_\_\_\_ Type of Relationship \_\_\_\_\_

### Other Correspondent Relationships

List any correspondent relationships

Correspondent Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contact Name \_\_\_\_\_ Email \_\_\_\_\_ Financial Institution's Phone \_\_\_\_\_

Volume for Last Years \$ \_\_\_\_\_ Units \_\_\_\_\_ Delegated  Yes  No Date Approved \_\_\_\_\_

### Branch Locations

If applicable, provide the following for all branch locations. *Attach additional pages if necessary.*

Branch Name _____	Branch Name _____
Contact Person _____	Contact Person _____
Address _____	Address _____
City _____ State _____ Zip _____	City _____ State _____ Zip _____
Phone _____ Email _____	Phone _____ Email _____

### Questions

▶ If you answer "YES" to any of the following questions, please describe the circumstances of each on a separate page and/or attach any additional documents:

Do any of the owner's of at least 20% or more of the company have assets that are held in a trust? <i>If yes, please provide a copy of the trust and list assets held.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have any judgements, liens, or bankruptcies to disclose? <input type="checkbox"/> Yes <input type="checkbox"/> No
Does the company and/or any of its officers, managers, directors, or employees have ownership interest directly or indirectly in any title company, escrow company, or closing agency? <i>If yes, please provide financials for the company.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	Are there any other adverse items that you believe would preclude you/your company from qualifying for this line of credit? <input type="checkbox"/> Yes <input type="checkbox"/> No
Has your firm had any repurchases in the past 24 months? <i>If yes, please attach a letter of explanation and agreement with investor, if available.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	Has an application for approval for your organization been denied, suspended, or discontinued by any investor or wholesale lender? <input type="checkbox"/> Yes <input type="checkbox"/> No
Has your firm had any indemnifications in the past 24 months? <i>If yes, please attach a letter of explanation and agreement with investor, if available.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	Have any owners or employees ever been convicted of a felony or real-estate or financial-related misdemeanor? <input type="checkbox"/> Yes <input type="checkbox"/> No
Does the company currently own any mortgage loans due to repurchase or inability to sell the loan on the secondary market? <input type="checkbox"/> Yes <input type="checkbox"/> No	Have you or your company's state license ever been suspended or revoked? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Has your company or any of its owners been named as a defendant in any lawsuit? <i>If yes, please attach a copy of the suit and evidence of its dismissal.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No



It's the Intellectual Capital™

# Warehouse Funding Application

## Emerging Mortgage Bankers

### Notices and Certifications

Applicant shall provide the Lender simultaneously with the submission of this Application Fee of \$700 (Non-refundable).

Federal law requires financial institutions to obtain sufficient information to verify your identity. You may be asked several questions and to provide one or more forms of identification to fulfill this requirement. In some instances we may use outside sources to confirm the information. The information you provide is protected by our privacy policy and federal law.

By signing below, Applicant submits this application and the information provided on all accompanying financial statements and schedules for the purpose of obtaining credit and represents that the information submitted is accurate and complete. Applicant acknowledges that representations made in this application will be relied on by Fidelity Bank in evaluating this application and, if approved, in extending credit. Applicant represents that none of the parties named in this application have relied on advice from Fidelity Bank in applying for or receiving credit. Applicant acknowledges that Fidelity Bank has not made any commitment to approve this application and extend credit, unless otherwise agreed to in writing. Fidelity Bank is authorized to conduct any inquiries it decides are necessary to verify the accuracy of the information contained in this application and to use any reasonable method to the creditworthiness of the Applicant. Fidelity Bank is also authorized to answer any questions from others about Fidelity Bank's credit experience with the parties in this application. Applicant will promptly notify Fidelity Bank of any subsequent changes which would affect the accuracy of this application, and will provide all documents and information that Fidelity Bank decides are necessary to complete this application. Applicant authorizes Fidelity Bank to retain this application, whether or not Fidelity Bank approves any extension of credit. Any intentional misrepresentation of the information contained herein could result in criminal action under federal law.

It is further understood that Fidelity Bank may make reference inquiries and that it may, at the sole expense of Fidelity Bank, order credit reports and/or independent background investigations on the applicant and/or principal officers.

#### ► Signature of Applicant(s)

Signed By \_\_\_\_\_ Authorized Signer Name and Title \_\_\_\_\_

#### ► Signatures of Three Most Senior Officers

Name _____	SSN _____
Signature _____	Date _____
Name _____	SSN _____
Signature _____	Date _____
Name _____	SSN _____
Signature _____	Date _____

#### ► Signatures of Prospective Guarantors

Name _____	Signature _____	Date _____
SSN _____	DOB _____	Driver's License No. _____
Name _____	Signature _____	Date _____
SSN _____	DOB _____	Driver's License No. _____
Name _____	Signature _____	Date _____
SSN _____	DOB _____	Driver's License No. _____
Name _____	Signature _____	Date _____
SSN _____	DOB _____	Driver's License No. _____

Revised 12/2018

**Reference Information**

Please provide four business references, at least three of which must be Investors.

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone \_\_\_\_\_ Email \_\_\_\_\_  
 Type of Business \_\_\_\_\_ Length of Time Known \_\_\_\_\_

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone \_\_\_\_\_ Email \_\_\_\_\_  
 Type of Business \_\_\_\_\_ Length of Time Known \_\_\_\_\_

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone \_\_\_\_\_ Email \_\_\_\_\_  
 Type of Business \_\_\_\_\_ Length of Time Known \_\_\_\_\_

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone \_\_\_\_\_ Email \_\_\_\_\_  
 Type of Business \_\_\_\_\_ Length of Time Known \_\_\_\_\_

**Due Diligence**

The following must be included in all Application Packages(?):

- Articles of Incorporation/Certificate of Incorporation (if closing loans in a name other than Applicant's)
- Copy of each principal's and guarantor's valid driver's license
- E&O Insurance and Fidelity Bond Coverage
- Current investor scorecards
- Trial balance for existing warehouse lines
- Copy of MERS resolution

**Required Documents Check List**

The following must be included in all Application Packages:

- Completed Commercial Loan Application signed by required parties
- Application Fee of \$700 (non-refundable)
- Most recent interim financial statements signed by Senior Officer
  - a. Last two years fiscal year end balance sheet & income statement
  - b. Most recent interim financial statement
  - c. Last two years corporate federal income tax returns
- A signed personal financial statement of each owner with 10% or more ownership
  - c. Resume
  - d. Two years personal tax returns
- Resumes of the three most senior Company Officers

Please mail the additional items along with this Application to:

Fidelity Bank  
 Attn: Brian Huddleston  
 8554 Katy Freeway  
 Suite 320  
 Houston, TX 77024