

PENNSYLVANIA HOUSING FINANCE AGENCY



PARTICIPATING LENDER APPLICATION

1	Organization name:	
2	Contact Person Name:	
	Title:	
	Phone:	
	E-mail:	
	Address:	
3	What is your organization's website address?	
4	Is your organization a subsidiary of another company or part of a holding company?	Yes <input type="checkbox"/> No <input type="checkbox"/>
5	If you answered "yes" to number 4, what is the name of the parent or holding company?	
6a	Participants must meet at least one of the following—is your organization: An institution whose deposits are insured by FDIC or NCUA?	Yes <input type="checkbox"/> No <input type="checkbox"/> FDIC # NCUA Charter#
	6b	Currently licensed as a Pennsylvania First Mortgage Banker? Yes <input type="checkbox"/> No <input type="checkbox"/> PA License #
7	What is your organization's NMLS number?	NMLS#
8	Your organization is a: <i>[Please check one lender type]</i> ___ Mortgage Company ___ State Bank ___ Federal Savings and Loan ___ Finance Company ___ Investment Bank ___ National Bank ___ State Credit Union ___ Other _____	
9	What types of loans does your organization originate? (check all that apply)	<input type="checkbox"/> Conventional <input type="checkbox"/> FHA <input type="checkbox"/> VA <input type="checkbox"/> RD
10a	If you wish to sell FHA insured or RD or VA guaranteed loans to PHFA, does your organization meet all requirements described in Chapter 1 of the Seller's Guide?	Yes <input type="checkbox"/> No <input type="checkbox"/>
10b	Provide your organizations HUD/FHA, VA, and/or USDA/RD single family lender approval letter (as applicable) if you are currently an approved lender. See Chapter 1 of the PHFA Seller's Guide for more details. Provide your approval number(s) here:	FHA DE # VA # RD #
11a	Financial Statement: Provide your organization's most recent audited, consolidated financial statement. If the statement is more than six months old, provide a current, unaudited, interim financial statement in addition to the previous years audited statement. If you are a subsidiary of another company or part of a holding company, please submit the same financial information for that organization, as well.	
11b	OR FNMA/FHLMC approval number(s): Provide your organizations FNMA and/or FHLMC single family seller/servicer approval letter if you are currently an approved one-to-four family first mortgage seller/servicer. Provide your approval number(s) here:	FNMA # FHLMC #
12	What is the date of your organization's fiscal year-end?	
13	Complete and submit the List of Authorized Officers and Underwriting Personnel (PHFA Form 29), including resumes for all persons listed.	
14	Review and execute the PHFA Master Origination and Sale Agreement .	
15	Provide a Certificate of insurance for your Fidelity Bond and Errors and Omissions coverage, listing Pennsylvania Housing Finance Agency as a certificate holder.	
16	Are you willing to sell loans to the Agency on a "Servicing-Released" basis?	Yes <input type="checkbox"/> No <input type="checkbox"/>

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17a	Do you want PHFA to fund a warehouse lender for your loan purchase?	Yes <input type="checkbox"/> No <input type="checkbox"/>
17b	If you answered "yes" to question 17a, please complete and attach a Warehouse Lender ACH Information Form (PHFA Form 70). Please note: PHFA can only accommodate one warehouse lender per participating lender	
18a	Specify the geographical area(s) within Pennsylvania where your organization currently originates mortgage loans:	
18b	Specify the geographical area(s) within Pennsylvania where your organization plans to originate PHFA loans:	
18c	Estimate the volume of loans that your organization anticipates selling to PHFA on an annual basis: The required minimum is 12 loans per calendar year.	Dollars Number
19a	Has your organization previously applied to become a PHFA participating lender?	Yes <input type="checkbox"/> No <input type="checkbox"/>
19b	Has your organization ever been approved as a PHFA participating lender?	Yes <input type="checkbox"/> No <input type="checkbox"/>
19c	If you answered 'yes' to a or b, provide a detailed explanation for why you are reapplying.	
20	Provide a copy of your Residential Mortgage Quality Control Plan. Your plan must include but should not be limited to:	
	<ul style="list-style-type: none"> • Appraisal Independence Requirements • Appraiser Quality Monitoring Requirements • Hiring procedures for checking employees and affiliates involved in the origination of mortgage loans against the following lists for ineligible parties: General Services Administration (GSA) and HUD's Limited Denial of Participation (LDP) Federal Housing Finance Agency's Suspended Counterparty Program (SCP), and National Mortgage Loan System (NMLS), if applicable. • Prefunding Quality Control process and procedures 	
21	Does your organization complete prefunding QC reports and post-closing QC reports per investor guidelines for the loan types your organization sells to PHFA?	Yes <input type="checkbox"/> No <input type="checkbox"/>
22	Provide a copy of your Fraud Detection Policy, including your procedure for preventing mortgage fraud in any transactions involving the funding of mortgage loans under PHFA's single family residential lending programs.	
	Does your organization conduct regular Fraud Detection trainings for your staff?	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Provide the date of your organizations next regularly scheduled Fraud Detection staff training.	Date:
	Will your organization provide written notice to PHFA of any fraud, suspected fraud or other suspicious activity involving loans sold to PHFA?	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Does your organization certify to having all appropriate fraud protection safeguards in place and to taking all necessary actions to address Suspicious Activity Report filings with the Financial Crimes Enforcement Network and otherwise comply with regulators?	Yes <input type="checkbox"/> No <input type="checkbox"/>
23	Does your organization have safeguards in place to prevent redlining and take action to monitor the results?	Yes <input type="checkbox"/> No <input type="checkbox"/>
24	Provide the name of your organizations loan pricing and product eligibility system.	

The undersigned, an officer or authorized agent of the organization submitting this application, certifies that on the date listed below the above information is accurate to the best of his/her knowledge and belief and that the organization represents and warrants to the Agency pursuant to the terms of the Master Origination and Sale Agreement and assures that all loans delivered to PHFA comply with all mortgage lending laws, regulations and licensing requirements and meet all applicable PHFA, Investor and insurer/guarantor guidelines including Fannie Mae, Freddie Mac, HUD FHA, VA and RD. The undersigned agrees to provide PHFA upon request with your organization's prefunding QC reports and post-closing QC reports per investor guidelines for the loan types your organization sells to PHFA.

TITLE: _____

NAME (Print) _____

SIGNATURE

DATE

Submit your application package and any required additional information that we may request within 120 days of your application. Mail packages to:

OVERNIGHT mail
Pennsylvania Housing Finance Agency Homeownership Programs 211 North Front Street Harrisburg, PA 17101

REGULAR mail
Pennsylvania Housing Finance Agency Homeownership Programs P.O. Box 8029 Harrisburg, PA 17105-8029

For more information visit the PHFA website at: <http://www.phfa.org/hop/lenders/offerloans.aspx>