



BROKER APPLICATION (CON'T)

Company/Broker Information:

Applying as: **Circle One** **Broker** **Non-delegated** **Both**

Legal Company Name: _____

DBA or Trade Name: _____

Former Co Name (If applicable) : _____

Legal Company Name: _____

Physical Business Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____ Email: _____

Contact Name: _____ Telephone: _____

Website Administrator Name: _____ Email: _____

Company Filing Information:

Please check one:

Sole Proprietorship Partnership Limited Liability Company Corporation Other

Filing Date: _____ Filing State: _____ Fed Tax ID #: _____

Licensing Information:

Broker of record name: _____ NMLS# _____ License # _____ Exp date: _____

Additional State Licenses: _____ If Multiple states, which license do you operate under per state?

Principals:

Principals/Owners	Title	Phone #/Ext	SSN Number	% of ownership

Has your company ever been suspended from selling mortgages by an investor? If yes, please provide an Explanation. Yes No

Has your company or any officer of the company ever had a mortgage or other professional license suspended, revoked or received any other disciplinary action from a regulatory agency? If yes, please provide an explanation. Yes No

Has your company, or any officer of the company, been named as a defendant in a lawsuit for alleged fraud or misrepresentation in connection with any real estate/mortgage related activity? If yes, please provide an explanation. Yes No



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Are you currently seeking government loan sponsorship with EMM?

Yes No

Are you currently originating government loans?

Yes No

FHA Title II Approval No:	
VA Agent ID Number:	

Does your company or any of the principals own or control a real estate company, real estate development company, construction company, appraisal management company or financial services company such as: title company, escrow company, tax preparation, or credit counseling? Yes No

Company Name	Type of Business	Ownership %	Principals

How many processors do you have on staff? _____ How many Loan Originators do you have on staff? _____

Volume History	# of units funded	Total \$ Amount Funded	% Conventional	% Government
Current TYD:				
Previous Year:				

Branch Offices: (if more than two, please provide a separate list)

Address:	Telephone:	Fax:	Contact Name:

If Non-Delegated, will you be using EMM's Closing Services?

Yes No

The undersigned declare(s) that the statements set forth are true and accurate. Emm Loans llc is hereby authorized to obtain verification from any source named herein, including pulling personal credit, and conduct any background inquiries deemed necessary in connection with the approval of this application.

Owner's Signature: _____
 Printed Name: _____

Date: _____

Owner's Signature: _____
 Printed Name: _____

Date: _____