

# Lender Enrollment Application

Intake form for prospective lenders wishing to enroll with Dream Home Fund. This form is not a binding document on its own. Execution of the Lender Participation Agreement (LPA) is the binding step. Intake responses are reviewed by Dream Home Fund staff before issuance of the LPA.

## Lender Information

Legal company name	
DBA / Trade name (if different)	
Entity type (LLC, Corp, Bank, Credit Union, etc.)	
State of organization	
Year founded	
Federal Employer Identification Number (EIN)	
Primary office address	
Mailing address (if different)	
Main phone	
Website URL	
NMLS Company ID	
Number of branches	
Approximate annual originations (units / volume)	
Approximate first-mortgage product mix (FHA / Conventional / VA / USDA / Non-QM, percent of each)	
Will the Lender originate Dream Home Fund silent seconds via Third Party Originators (TPOs)?	Yes / No
If yes, approximate number of active TPOs	

## Primary Contacts

### Designated Program Contact (operational)

Name	
Title	
Email	
Phone	

**Executive Sponsor (authorized signatory of the LPA)**

Name	
Title	
Email	
Phone	

**Compliance / Quality Control Contact**

Name	
Title	
Email	
Phone	

**State Licensing**

List each state in which the Lender is licensed to originate residential mortgage loans, the type of license held, and the license/registration number. Attach a separate page if needed.

State	License Type	License Number	Expiration Date

**Regulatory History (last 3 years)**

Has the Lender been the subject of any of the following during the prior 36 months?

Event	Y/N	If Yes, describe
Formal regulatory enforcement action (any State or Federal authority)		
Suspension or revocation of any mortgage lender license		
Cease and desist order		
Material consent order		
Civil or criminal action related to mortgage origination practices		
Material findings in any GSE, HUD, or investor audit		
Lender repurchase demands (over 1% of originations)		

Event	Y/N	If Yes, describe
Bankruptcy filing or assignment for the benefit of creditors		

If any answer above is "Yes," attach a written explanation including action taken to remediate.

## Insurance Coverage

Per Section III of the Lender Program Manual, each enrolled Lender must maintain at all times: Fidelity Bond (or Direct Surety Bond), Errors and Omissions insurance, Forgery insurance, and Money and Securities coverage. Provide evidence of current coverage for each.

Coverage	Carrier	Policy Number	Coverage Amount	Expiration Date
Fidelity Bond				
Errors and Omissions				
Forgery				
Money and Securities				

Attach certificates of insurance evidencing each policy.

## Financial Standing

Attach the Lender's most recent audited or reviewed financial statement, or a substitute acceptable to Dream Home Fund.

Most recent fiscal year end	
Total assets	
Total equity / net worth	
Net income (most recent fiscal year)	
Auditor (if applicable)	

## Program Interest

Which Dream Home Fund DPA programs does the Lender intend to offer?

- Dream Simple (available upon HUD-Approved Nonprofit Roster approval)

Comments / additional information:

## Lender Certification

The undersigned, an authorized signatory of the Lender, certifies that:

- All information provided in this application is true, complete, and accurate to the best of the Lender's knowledge as of the date below.

2. The Lender authorizes Dream Home Fund to verify any information provided, including through inquiry of regulatory authorities, NMLS, credit reporting agencies, and references.
3. The Lender acknowledges that this application does not constitute approval to participate in Dream Home Fund's DPA programs. Approval requires execution of a Lender Participation Agreement and confirmation in writing from Dream Home Fund.
4. The Lender will promptly notify Dream Home Fund in writing of any material change to the information provided in this application.

**Signature**

Signature	
Printed name	
Title	
Date	

**Internal Use Only: Dream Home Fund**

Date received	
Reviewer	
Outcome	Approved / Conditional / Denied / Pending
Conditions / Notes	
LPA issued (date)	
LPA executed (date)	
Effective enrollment date	
Annual recertification due	