



SUBMISSION FORM & FEE SCHEDULE

SUBMIT YOUR LOANS ONLINE NOW
AT www.bluepointmtg.com

Click the Register & Lock button to submit

SUBMISSION DATE: INITIAL DISCLOSURES BY: BROKER LENDER | ACCOUNT EXECUTIVE:

BROKER INFORMATION													
Company Name:				Broker NMLS ID:		State License No.:		License Type:					
Address:													
Processor:				LO Name:			LO NMLS ID:						
Processor Phone:				LO Phone:									
Processor Email:				LO Email:									
Notes:													
BORROWER INFORMATION													
Borrower:				Borrower Email:									
Co-Borrower(s):				Co-Borrower Email:									
Property Address:													
LOAN INFORMATION													
Appraisal:		Yes		No		Appraised or Estimated Value:			Purchase Price:				
Loan Amount (1 st TD):					Loan Amount (2 nd TD):								
Interest Rate:					LTV/CLTV:								
CREDIT REPORT AND USER CREDENTIALS:						Qualifying Credit Scores:		Borrower:		Co-Borrower(s):			
Impounds:		Yes		No		Impound Type:		Both		Taxes Only	Hazard Only		
BROKER COMPENSATION:					CONSUMER PAID			LENDER PAID					
Loan Origination Fee					%			\$			\$		
Appraisal Fee					%			\$			\$		
Credit Report Fee								\$			\$		
3rd Party Processing Fee					NMLS # _____			\$			\$		
OR Processing Fee paid to broker (Borrower Paid Transactions ONLY)													
LENDER:													
Lender Fee: \$495 VA IRRRL and FHA Streamline, \$1195 (CA) \$795 (All Other States)								\$		\$			
RATE CREDIT: (only check one box)					CONSUMER PAID			LENDER PAID					
Lender Credit to Borrower					%			\$			\$		
Discount Point					%			\$			\$		
SUBMISSION DETAILS													
PURPOSE		OCCUPANCY		PROPERTY		COMP. TYPE		CREDIT/DU/LP		LOAN TYPE		MI	
Purchase		Primary		SFR		Lender Paid		Use broker credit*		30 yr		10/1	Single
Refi Rate/Term		2nd Home		PUD		Compensation		Lender to pull credit		25 yr		7/1	Premium
Cash Out		Investment		2 Unit		Borrower Paid		Use broker DU/LP*		20 yr		5/1	Monthly
Streamline Refi				3-4 Unit		Compensation		Lender to pull DU/LP		15 yr		3/1	Annually
				Condo		PRICING FEE				10 yr		5/1 I.O.*	LPMI
				Non-Warrantable		Fee In		*Include credentials if applicable				*Choice Advantage & Leverage Products only	
				Condo		Fee Out							
				Manufactured									
LOAN PRODUCT								CREDIT GRADE		AUS TYPE*		DOC TYPE	
DU Conventional		FHA				Choice Advantage		A		DU		Full Doc	
LP Conventional		FHA Streamline				Choice Ascent		A-		LP		W-2 Only	
High Balance Conforming		VA IRRRL				Choice Investor		B+				Bank Statements	
LP Super Conforming		VA				Core Jumbo		B				DSCR	
DU Refi Plus & HARP						Leverage Prime		B-				>= 1.15	
Open Access						Leverage Lite		C				< 1.15	
LPMI						Leverage Investor DTI							
FNMA DU Home Ready						Leverage Investor DSCR						*AUS must be released and finalized to BluePoint Mortgage	

Initial LE (must be signed by borrower) and if applicable broker Change of Circumstance Form and Revised LE (required if locked prior to submission)	
Intent to Proceed	
Privacy Disclosure	
Settlement Servicers Provider List	
Homeownership Counseling Notice	
Housing Counselors Near You	
Social Security Administration Authorization Form	
4506 T (Signed and dated)	
Borrower Authorization	
ECOA / Fair Lending	
Fair Credit Reporting Act (FCRA)	
Any and All State Required Disclosures	
IF FHA	IF VA
FHA – Important Notice to Home Buyer 92900B	VA – Signed 1802-A
FHA – Notice Regarding Assumption	VA – Request for Certificate of Eligibility
FHA – Informed Consumer Choice Notice	VA – Nearest Living Relative Form
FHA – For Your Protection: Home Inspection	VA – Child Care Statement
FHA – Important Notice to Home Buyer 92900B	VA – COE-Certificate of Eligibility
FHA – Informed Consumer Choice Notice	VA – DD214

CONVENTIONAL /PORTFOLIO CHOICE AND LEVERAGE PROGRAM REQUIREMENTS

This Submission Package (8 pages) Fannie Mae 3.2 File 1008 1003 signed and dated by borrower/LO DU/LP Findings (if available) Credit Report Borrower Authorization	Income Documentation Asset Documentation Gift Letter (if applicable) Purchase Contract (if applicable) Copy of Canceled EMD Check (if applicable) Title Commitment
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FHA REQUIREMENTS

This Submission Package (8 pages) Fannie Mae 3.2 File HUD/VA Addendum to URLA (92900-A) signed by borrowers Loan Transmittal Summary (92900LT) 1003 signed and dated by borrower/LO Case # Printout CAIVRS, FHA case transfer AUS Findings (if available) Credit Report Income Documentation Borrower Authorization	Asset Documentation Gift Letter (if applicable) Purchase Contract (if applicable) Copy of Canceled EMD Check (if applicable) Title Commitment Evidence of Social Security Number and Photo ID Hazard Insurance Payoff Demand (streamlines) Note and DOT for current mortgage (streamlines) Fee itemization sheet (streamlines)
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VA REQUIREMENTS

This Submission Package (8 pages) Fannie Mae 3.2 File CAIVRS Fee itemization sheet Income (Documentation) 1003 signed and dated by borrower/LO	COE AUS findings Credit Report Borrower Authorization	Most recent bank statement Completed 26-1880, DD214 Completed Verification of VA Benefits Nearest living relative Purchase Contract (if applicable)	Title Commitment Payoff Demand Hazard Insurance
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IRRRL (VA STREAMLINE) REQUIREMENTS

This Submission Package (8 pages) Fannie Mae 3.2 File New IRRRL assignment # to BluePoint Mortgage 1003 signed and dated by borrower/LO CAIVRS Current VA note and last recorded DOT Fee itemization sheet Current Payoff Demand	Credit Report Nearest living relative Completed 26-1880 Completed Verification of VA Benefits Hazard Insurance Borrower Authorization
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**Authorization for the Social Security Administration (SSA)
To Release Social Security Number (SSN) Verification**

Printed Name:	Date of Birth:	Social Security Number:
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I want this information released because I am conducting the following business transaction:
Seeking a mortgage

Reason (s) for using CBSV: (Please select all that apply)

- | | |
|--|--|
| ☒ Mortgage Service | ☐ Banking Service |
| ☐ Background Check | ☐ License Requirement |
| ☐ Credit Check | ☐ Other |

with the following company ("the Company"):

Company Name: Royal Pacific Funding Corporation

Company Address: 3070 Bristol St. Suite 400, Costa Mesa, CA 92626

I authorize the Social Security Administration to verify my name and SSN to the Company and/or the Company's Agent, if applicable, for the purpose I identified.

The name and address of the Company's Agent is:

CREDIT PLUS
31550 WINTERPLACE PKWY, SALISBURY, MD 21804

I am the individual to whom the Social Security number was issued or the parent or legal guardian of a minor, or the legal guardian of a legally incompetent adult. I declare and affirm under the penalty of perjury that the information contained herein is true and correct. I acknowledge that if I make any representation that I know is false to obtain information from Social Security records, I could be found guilty of a misdemeanor and fined up to \$5,000.

This consent is valid only for 90 days from the date signed, unless indicated otherwise by the individual named above. If you wish to change this timeframe, fill in the following:

This consent is valid for _____ days from the date signed. _____ (Please initial.)

Signature: _____ Date Signed: _____

Relationship (if not the individual to whom the SSN was issued): _____

Contact information of individual signing authorization:

Address: _____

City/State/Zip: _____

Phone Number: _____

Privacy Act Statement Collection and Use of Personal Information

Sections 205(a) and 1106 of the Social Security Act, as amended, allow us to collect this information. Furnishing us this information is voluntary. However, failing to provide all or part of the information may prevent us from releasing information to a designated company or company's agent.

We will use the information to verify your name and Social Security number (SSN). In addition, we may share this information in accordance with the Privacy Act and other Federal laws. For example, where authorized, we may use and disclose this information in computer matching programs, in which our records are compared with other records to establish or verify a person's eligibility for Federal benefit programs and for repayment of incorrect or delinquent debts under these programs.

A list of routine uses is available in our Privacy Act System of Records Notice (SORN) 60-0058, entitled Master Files of SSN Holders and SSN Applications. Additional information and a full listing of all our SORNs are available on our website at www.socialsecurity.gov/foia/bluebook.

Paperwork Reduction Act Statement - This information collection meets the requirements of 44 U.S.C. § 3507, as amended by section 2 of the Paperwork Reduction Act of 1995. You do not need to answer these questions unless we display a valid Office of Management and Budget control number. We estimate that it will take about 3 minutes to complete the form. You may send comments on our time estimate above to: SSA, 6401 Security Blvd., Baltimore, MD 21235-6401. ***Send to this address only comments relating to our time estimate, not the completed form.***

-----TEAR OFF-----

NOTICE TO NUMBER HOLDER

The Company and/or its Agent have entered into an agreement with SSA that, among other things, includes restrictions on the further use and disclosure of SSA's verification of your SSN. To view a copy of the entire model agreement, visit [HYPERLINK http://www.ssa.gov/cbsv/docs/SampleUserAgreement.pdf](http://www.ssa.gov/cbsv/docs/SampleUserAgreement.pdf)

Anti Steering Safe Harbor Disclosure – Fixed Rate Loans

Date:
Prepared by:

Prepared for:

Originator ID:
License #:
Phone:

Origination Company ID:
Origination Company License #:

Phone:
Fax:

We checked a significant number of creditors with which we normally do business. The following table summarizes the loans with an annual percentage rate which may increase after consummation which we think you likely qualify for:

	Lowest Interest Rate	Lowest Origination Fees/Discount Points	Lowest Rate with No Risky Features	Our recommended loan
Description				
Loan amount	\$	\$	\$	\$
Initial interest rate	%	%	%	%
Origination Fees/Discount Fees	\$	\$	\$	\$

* The risky features that are part of this loan include ☐ negative amortization, ☐ prepayment penalty, ☐ interest-only payments, ☐ a balloon payment in the first 7 years of the loans, ☐ a demand feature, ☐ shared equity, and/or ☐ shared appreciation. Please let us know if you are unclear about any of these features.

Our recommendation was made for the following reason(s):

- ☐ This is the loan with the lowest rate
- ☐ This is the loan with the lowest rate without risky* features
- ☐ This is the loan with the lowest closing costs
- ☐ Other

Other options may be available. Please ask if these options here do not fit your needs.

Borrower Print Name _____ Date _____

Borrower Print Name _____ Date _____

Originator _____ Date _____

HOMEOWNERSHIP COUNSELING NOTICE

Loan Number:

Date:

Provided By:

Borrower(s):

Property Address:

Housing counseling agencies approved by the U.S. Department of Housing and Urban Development (HUD) can offer independent advice about whether a particular set of mortgage loan terms is a good fit based on your objectives and circumstances, often at little or no cost.

If you are interested in contacting a HUD-approved housing counseling agency in your area, you can visit the Consumer Financial Protection Bureau's (CFPB) website, www.consumerfinance.gov/find-a-housing-counselor, and enter your zip code.

You can also access HUD's housing counseling agency website via www.consumerfinance.gov/mortgagehelp.

For additional assistance with locating a housing counseling agency, call the CFPB at 1-855-411-CFPB (2372).

By signing below, I/we acknowledge that I/we have read and received a copy of this document.

Borrower Date

Borrower Date

Borrower Date

Borrower Date

Borrower Date

Borrower Date

Acknowledgement of Intent to Proceed

Borrower(s):

Loan Number:

Property Address:

Lender: **BluePoint Mortgage**

Loan Originator:

License #: 01403107
NMLS #:320004

License #:
NMLS #:

The undersigned applicants hereby indicate their intention to proceed with the transaction identified in the Loan Estimate dated XXXX XX, XXXX provided by **Royal Pacific Funding Corp.**

By signing below, I hereby acknowledge reading and understanding all of the information disclosed above, and receiving a copy of this disclosure on the date indicated below.

BORROWER

DATE

CO-BORROWER

DATE