



BONDCORP MORTGAGE
C O M P A N Y
M O R T G A G E B A N K I N G A N D B R O K E R A G E

Corporate Office

1200 Quail Street, Suite 160
Newport Beach, CA 92660
TEL: 949-250-8911

San Diego Office – Wholesale Lending Division

777 S. Highway 101, Suite 206
Solana Beach, CA 92075
TEL: 858-759-7770 FAX: 858-759-4177

MORTGAGE BROKER APPLICATION

Thank you for your interest in becoming an approved broker. We have provided a checklist below containing the items required when submitting your application. Upon receipt and review of your completed application, we will promptly notify you of our decision regarding your application. You will then be supplied a **user i.d.** and **password** to start entering new loans.

The following documents must be completed with the application package:

- Mortgage Broker Application (all information is required and authorizations to release information must be completed and executed)**
- Mortgage Broker Agreement (unaltered and signed by designated broker/officer)**
- W-9 form**

Please feel free to enclose any documentation that you feel will assist us in expediting the approval process.

Please send the completed package to the Client Services Department at the address below:

Bondcorp Mortgage

777 S. Highway 101, Suite 206
Solana Beach, CA 92075
Fax: 858-759-4177

**Any questions regarding the above direct to Client Services at:
858-759-7770**

MORTGAGE BROKER APPLICATION

Company/Broker Information

Business Name: _____

Doing Business As: _____

Street Address: _____

City, State Zip: _____ County: _____

Phone No.: _____ Fax No.: _____

E-mail Address: _____

Broker(s) Name(s): _____

Broker(s) Social Security Number(s): _____

Corporate tax identification number: _____

Please Check One Sole Proprietor__ Corporation __

License/Approval

Broker name license was issued to: _____

License No.: _____ Date Issued: _____ Expiration Date: _____

Lender References (If additional References, please use additional page)

Lender Name: _____

Contact Person: _____

Lender Name: _____

Contact Person: _____

Lender Name: _____

Contact Person: _____

Principals (If additional Principals, please use Application Supplement)

Name: _____

Title: _____ Percent Owned: ____%

Social Security No.: _____

Residence Address: _____

Name: _____

Title: _____ Percent Owned: ____%

Social Security No.: _____

Residence Address: _____

Name: _____
Title: _____ Percent Owned: ____%
Social Security No.: _____
Residence Address: _____

Branch Offices (If additional Branches, please use Application Supplement) How many _____?

Branch Name: _____ Phone No.: _____
Contact Person: _____ Title: _____
Address: _____
Fax No: _____

Contact Information

Processing : _____ E-Mail: _____
Phone No.: _____
Management: _____ E-Mail: _____
Phone No: _____

Loan Production

Prior Year Funding Volume Conventional: # _____ \$ _____
Prior Year Funding Volume Jumbo: # _____ \$ _____
Prior Year Funding Volume Sub-Prime: # _____ \$ _____
Prior Year Funding Volume Second Trust Deed: # _____ \$ _____
Additional information: _____

Please have each principal listed above complete and sign the following:

I/We certify that all information above is true, complete and correct. I/We also authorize Bondcorp Inc. to obtain consumer credit bureau reports or other reporting agency reports on the Company and its principal officers, call references, and verify resume information in order to have our firm approved to submit mortgage loan packages.

Signature Date Social Security Number

Signature Date Social Security Number

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