



WAREHOUSE APPLICATION

Axos Bank
4350 La Jolla Village Dr, Suite 140
San Diego, CA 92122
Phone: (888) 764-7080
Email: WLD@axosbank.com

WAREHOUSE APPLICATION

Warehouse Line Amount Requested	Axos Bank Contact/Account Representative
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BUSINESS PROFILE

Company Information	Business Name	Street Address	
	City	State	Zip
	Phone	Fax	Website
	Primary Contact	Email	

Firm's DBA Names	Firm's DBA Name
	Firm's DBA Name
	Firm's DBA Name
	Firm's DBA Name

Tax & Business Structure	Federal Tax Employer ID Number	Date Founded	State of Incorporation								
	Firm's Business Structure (select one): <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Sole Proprietorship</td> <td style="width: 33%;">General Partnership</td> <td style="width: 33%;">LLC w/ tax status of Sole Prop</td> </tr> <tr> <td>C-Corporation</td> <td>Limited Partnership</td> <td>LLC w/ tax status of Corporation</td> </tr> <tr> <td>S-Corporation</td> <td>Bank</td> <td>Other:</td> </tr> </table>			Sole Proprietorship	General Partnership	LLC w/ tax status of Sole Prop	C-Corporation	Limited Partnership	LLC w/ tax status of Corporation	S-Corporation	Bank
Sole Proprietorship	General Partnership	LLC w/ tax status of Sole Prop									
C-Corporation	Limited Partnership	LLC w/ tax status of Corporation									
S-Corporation	Bank	Other:									

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APPLICATION CHECKLIST

	Initial \$1,000.00 non-refundable Application Fee made payable to Axos Bank
	Current Business Licenses
	Current up-to-date Resumes for all Owners, Principals, Brokers of Record, Controller, Operations Manager, Chief Underwriting Officer, and Director of Funding. Resumes should include positions held, job responsibilities and dates of employment.
	<p>Required Legal Documents:</p> <ul style="list-style-type: none"> • If the firm is a Corporation, submit a stamped/ filed copy of the Articles of Incorporation. • If the firm is an LLC, submit a stamped/ filed copy of the Membership Agreement. • <i>If the firm is operating under any assumed, fictitious, or DBA name, submit a copy of the properly filed/registered Partnership Agreement.</i> • <i>Bylaws and/or Unanimous Consent Resolutions</i>
	DBA - If Mortgage Banker possesses an active or inactive DBA or has in the past two years, provide a copy of the Fictitious Business Name Filing with the County including permission from the State Corporation Commission allowing use of the DBA. If the DBA is used in multiple states, documentation is needed for each state. Provide a brief explanation on the usage of each DBA, active or inactive covering the past 2 years as it relates to your business.
	W-9 Form, signed by an authorized signer, indicating the firm's main address, appropriate box checked (Individual/Sole Proprietor, Corporation, LLC, Partnership), and the appropriate taxpayer identification number (TIN). The W-9 Form should be filled out in the full legal name of the firm – not the DBA name.
	Most recent 2 years Audited Financial Statements
	Year-to-Date unaudited Financial Statements
	Most recent 2 years Business Tax Returns
	Most recent 2 years Individual Tax Returns for all owners of 25% or more
	Personal Financial Statement for all owners of 25% or more, most recent monthly bank statement from largest asset account
	Investor Scorecards
	A copy of your Fidelity Bond and E&O policy
	Agency Approval Letters
	A copy of your Quality Control Plan
	Business Overview Narrative
	Entity Diagram
	MERS ID Number
	Executed 4506-C for Business and Individual owners of 25% or more

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OWNERSHIP, PRINCIPLES AND AUTHORIZED SIGNERS

	Social Security Number	Owner	Ownership Percentage (%)	Years with Firm	Years in Mortgage Industry	Authorized Signer

KEY PERSONNEL LIST

Sales Manager	Name	Email
Operations Manager	Name	Email
Secondary Marketing	Name	Email
Underwriting Manager	Name	Email
Shipping / Delivery	Name	Email
Post Closing	Name	Email

BANKING PROFILE

Banking Profile	Years in Business	Years Banking Loans	Number of Branches	Number of Operations Centers
	Number of Loan Originators	Number of Ops Staff	Location of Ops/Fulfillment Centers	
	Do You Process Loans at Branch Locations?	Number of States Licensed In	Top States for Business	

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LOAN PRODUCTION

Volume Profile	Total Loan Volume Of Previous Year \$				
	CONV	%	GOVT	%	
	NON-AGENCY		%	NON-QM	%
	PURCHASE	%	REFINANCE	%	
	REVERSE		%		
	FIXED	%	ARM	%	
	2NDs/HELOCs		%		
Total loan volume YTD\$					
Expected Axos Bank Product Submissions within 30 days of approval (Loans Sold to Axos Bank)\$					
Expected Annual Axos Bank Warehouse Volume\$					

SALES & REFERRAL SOURCES

Lead Sources	REALTORS	%	PRIOR CUSTOMERS	%
	DIRECT MAIL	%	INTERNET	%
	CALL CENTER	%	OTHER	%

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EXISTING WAREHOUSE LINES AND HISTORY

Warehouse Lender	Line Amount	Date Opened	Reason for Closure

INVESTORS

Investor	Date Approved	Delegated?	Best Efforts or Mandatory?

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WAREHOUSE QUESTIONS

1	What loan origination system do you use?
2	What warehouse lending system(s) do you use?
3	Do you outsource hedging activities? If yes, with whom?
4	Do you utilize a vendor for pricing or best-execution programs? If yes, please list vendor(s)
5	Do you have designated underwriting authority from investors other than FNMA, FHLMC, FHA, HUD/USDA/VA? If so, with whom? <input type="checkbox"/> Yes <input type="checkbox"/> No
6	MERS Org ID# _____
7	Are you an approved Seller/Servicer for any of the following? <input type="checkbox"/> FNMA <input type="checkbox"/> FHLMC <input type="checkbox"/> GNMA <input type="checkbox"/> FHA <input type="checkbox"/> HUD <input type="checkbox"/> USDA <input type="checkbox"/> VA
8	Have you ever been terminated under other Correspondent Lending Relationships or been fined, sanctioned, or suspended by FHA, VA, Fannie-Mae, Freddie-Mac, or any regulatory agency? If yes, attach letter of explanation. <input type="checkbox"/> Yes <input type="checkbox"/> No
9	Do you currently have any aged loans over 60 days on your other warehouse line(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, how many and what are the circumstances?
10	Have you had any repurchase loans in the past two years? <input type="checkbox"/> Yes <input type="checkbox"/> No
11	Do you currently have any repurchase requests outstanding? <input type="checkbox"/> Yes <input type="checkbox"/> No
12	Have you (any owners ≥ 20%) ever been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No
13	Do you currently have any outstanding lawsuits and/or judgments against you? If yes, attach letter of explanation. <input type="checkbox"/> Yes <input type="checkbox"/> No

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AFFILIATED COMPANIES

Does the Firm and/or any owners of the Firm have an ownership interest in, or affiliation with any Escrow/Closing Company, Title Company, Real Estate or Appraisal Firm?

YES NO

If yes, please provide the full name and address of each company and the type of business in which they engage:

Name	Business Type
Address	
Name	Business Type
Address	
Name	Business Type
Address	

(Attach a copy of firms standard Affiliated Business Disclosure Form – attach additional sheets if necessary)

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CERTIFICATIONS

- The information contained herein and in the attachments is true and correct. Any material misrepresentation contained herein is grounds for termination of any relationship with Axos Bank.
- Firm is duly organized under the laws of its state of incorporation or organization and has the authority to enter into this Agreement.
- Firm and all its locations are properly licensed or otherwise authorized in all states in which it does business.
- Axos Bank is hereby authorized to obtain verification of information from any source disclosed herein.
- That the owners, principals and senior management consent to allow Axos Bank to periodically investigate their backgrounds. The source of these checks may include, but is not limited to obtaining credit reports, etc.
- Axos Bank is authorized to pull business credit reports, Dunn & Bradstreet Reports, MARI Reports, MERS reports, LexisNexis, Public Records or any other business reporting sources or vendors.
- By signing this application, Firm agrees to receive any communication deemed necessary by Axos Bank, including but not limited to marketing material, bulletins, and rate sheets. Further, the Firm consents to Axos Bank's use of the facsimile numbers and email addresses included herein or any other number provided in the future by the Firm for said communication.
- All ownership, principal and senior management information listed in this application is true and correct. Further, by signing this application ownership certifies that all individuals listed on page one in this application as authorized signors are duly authorized to sign any legal agreement binding the Firm and Axos Bank.
- The Firm complies with all applicable federal, state and local "high-cost" and/or 'predatory lending' laws and has a due diligence process in place to ensure compliance and to prevent placing high-cost and predatory loans with Axos Bank.
- The Firm shall indemnify and hold Axos Bank harmless from any claims and costs, including attorney's fees arising from fraud or misrepresentation or from failure to comply with applicable law or the terms and conditions of the Master Repurchase Agreement.

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SIGNATURES

Preferred Method of Contact:

Phone: _____ Email Address: _____

Dated signatures from all owners and authorized signers listed on page three of this application (or attachment) must be provided below.

Applicant:

Axos Bank:

Signature

Signature

(Print Name)

(Print Name)

Company

Axos Bank
4350 La Jolla Village Dr, Suite 140
San Diego, CA 92122

Address

Date

Date



WAREHOUSE APPLICATION

AUTHORIZATION/RELEASE FOR BUSINESS AND INDIVIDUALS

(“Applicant”)

Acknowledges that it is in the best interest of both Applicant and Axos Bank to perform due diligence concerning Applicant’s background and experience. Applicant further acknowledges that Applicant benefits from the efficiencies in the due diligence process that are possible when Axos Bank and other similarly-situated entities in the mortgage industry exchange information about their experiences in doing business with individuals and companies such as Applicant. Therefore, Applicant hereby consents and gives Axos Bank permission to submit the name of Applicant’s company and any and all employees of that company for screening through any and all mortgage industry backgrounddatabases. Applicant understands that Axos Bank performs quality control reviews of the loans that Applicant submits to Axos Bank for registration, review, underwriting, and/or purchase. Applicant understands and hereby consents to the release of information about any loan application that is believed to contain misrepresentations and/or irregularities. Applicant agrees and gives its consent that it and its employees may be named as the originating entity or loan officers on such loans, whether or not Applicant or its employees are implicated in the misrepresentations and/or irregularities. Applicant hereby releases and agrees to hold harmless Axos Bank, all subscribers, and any trade associations that endorse the system from any and all liability for damages, losses, costs, and expenses that may arise from reporting or use of any information submitted by Axos Bank or any other subscriber recorded in the system, and used in any way by Axos Bank or any other subscriber.

Applicant:

Axos Bank:

Signature

Signature

(Print Name)

(Print Name)

Company

Axos Bank
4350 La Jolla Village Dr, Suite 140
San Diego, CA 92121

Address

Date

Date

Axos Bank
4350 La Jolla Village Dr, Suite 140
San Diego, CA 92122
Phone: (888) 764-7080
Email: WLD@axosbank.com



Certification of Beneficial Owners Of Legal Entity Customer

GENERAL INSTRUCTIONS

What is this form?

To help the government fight financial crime, Federal regulation requires certain financial institutions to obtain, verify, and record information about the beneficial owners of legal entity customers. Legal entities can be abused to disguise involvement in terrorist financing, money laundering, tax evasion, corruption, fraud, and other financial crimes. Requiring the disclosure of key individuals who own or control a legal entity (i.e., the beneficial owners) helps law enforcement investigate and prosecute these crimes.

Who has to complete this form?

This form must be completed by the person opening a new account on behalf of a legal entity with any of the following U.S. financial institutions: (i) a bank or credit union; (ii) a broker or dealer in securities; (iii) a mutual fund; (iv) a futures commission merchant; or (v) an introducing broker in commodities.

For the purposes of this form, a legal entity includes a corporation, limited liability company, or other entity that is created by a filing of a public document with a Secretary of State or similar office, a general partnership, and any similar business entity formed in the United States or a foreign country. Legal entity does not include sole proprietorships, unincorporated associations, or natural persons opening accounts on their own behalf.

What information do I have to provide?

This form requires you to provide the name, address, date of birth and Social Security number (or passport number or other similar information, in the case of Non-U.S. Persons) for the following individuals (i.e., the beneficial owners):

- (i) Each individual, if any, who owns, directly or indirectly, 25 percent or more of the equity interests of the legal entity customer (e.g., each natural person that owns 25 percent or more of the shares of a corporation); **and**
- (ii) An individual with significant responsibility for managing the legal entity customer (e.g., a Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, or Treasurer).

The number of individuals that satisfy this definition of "beneficial owner" may vary. Under section (i), depending on the factual circumstances, up to four individuals (but as few as zero) may need to be identified. Regardless of the number of individuals identified under section (i), you must provide the identifying information of one individual under section (ii). It is possible that in some circumstances the same individual might be identified under both sections (e.g., the President of Acme, Inc. who also holds a 30% equity interest). Thus, a completed form will contain the identifying information of at least one individual (under section (ii)), and up to five individuals (i.e., one individual under section (ii) and four 25 percent equity holders under section (i)).

Axos Bank may also request a copy of a driver's license or other identifying document for each beneficial owner listed on this form.



Certification of Beneficial Owners Of Legal Entity Customer

Name of Natural Person Opening the Account	Position/Title of Natural Person Opening the Account
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Legal Entity Information			
Name of Legal Entity for Which the Account is Being Opened			Type of Legal Entity
Street Address (P.O. Box is not permitted)		City	State Zip/Postal Code

Section I: Beneficial Owner Information				
List each individual , if any, who, directly or indirectly, through any contract, arrangement, understanding, relationship or otherwise owns 25 percent or more of the equity interests of the legal entity listed above. (If no individual meets this definition, please write "Not Applicable.")				
Owner 1 Name		% of Ownership	Date of Birth	For U.S. Persons: Social Security Number
Street Address (P.O. Box is not permitted)		City		State Zip/Postal Code
For Non-U.S. Persons: Identification Type ¹	Identification Number	Country of Issuance	Issue Date	Expiration Date
Owner 2 Name		% of Ownership	Date of Birth	For U.S. Persons: Social Security Number
Street Address (P.O. Box is not permitted)		City		State Zip/Postal Code
For Non-U.S. Persons: Identification Type ¹	Identification Number	Country of Issuance	Issue Date	Expiration Date
Owner 3 Name		% of Ownership	Date of Birth	For U.S. Persons: Social Security Number
Street Address (P.O. Box is not permitted)		City		State Zip/Postal Code
For Non-U.S. Persons: Identification Type ¹	Identification Number	Country of Issuance	Issue Date	Expiration Date
Owner 4 Name		% of Ownership	Date of Birth	For U.S. Persons: Social Security Number
Street Address (P.O. Box is not permitted)		City		State Zip/Postal Code
For Non-U.S. Persons: Identification Type ¹	Identification Number	Country of Issuance	Issue Date	Expiration Date

Section II: Controlling Owner Information				
<p>One individual with significant responsibility for managing the legal entity listed above, such as:</p> <ul style="list-style-type: none"> (i) An executive officer or senior manager (e.g., Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, Treasurer) or; (ii) Any other individual who regularly performs similar functions. <p style="text-align: center;">If appropriate, an individual listed under Section (I) above may also be listed in this section (II).</p>				
Controlling Owner Name		Title	Date of Birth	For U.S. Persons: Social Security Number
Street Address (P.O. Box is not permitted)		City		State Zip/Postal Code
For Non-U.S. Persons: Identification Type ¹	Identification Number	Country of Issuance	Issue Date	Expiration Date

<p>I, _____, hereby certify, to the best of my knowledge, that the information provided above is complete and correct. <small>(Name of Natural Person Opening Account)</small></p> <p>In addition, the above listed legal entity hereby agrees to promptly notify the bank upon any change in the information provided above.</p>	
Signature	Date

¹ In lieu of a passport number, Non-U.S. Persons may also provide an alien identification card number, or number and country of issuance of any other government-issued document evidencing nationality or residence and bearing a photograph or similar safeguard.