

Application for Seller and/or Servicer Approval

Thank you for your interest in becoming a Fannie Mae approved seller and/or servicer. A company seeking approval as a Fannie Mae seller or servicer must fully complete this Application before submission. For assistance, please email newsellerservicer_inquiries@fanniemae.com.

Section I: Company Information

Applicant's Company Name (Legal name as shown on articles of incorporation, formation, or organization, or most current state or federal charter): Text box				
Company's Principal Place of Business Street Address: Text box	City: Text box	State: Drop-down box, state selections	Zip Code: Five-digit number box	
Mailing Street Address (if different): Text box	City: Text box	State: Drop-down box, state selections	Zip Code: Five-digit number box	
Type of approval request:				
Seller-only			Yes checkbox	
Seller and Servicer (using a subservicer)			Yes checkbox	
Seller and Servicer (in-house servicing)			Yes checkbox	
Servicer Only (using a subservicer)			Yes checkbox	
Servicer Only (in-house servicing)			Yes checkbox	
UCDP-only 5-digit ID number (If applicable): Five-digit number box		DU-only 5-digit ID number (if applicable): 5-digit number box	Non-seller/servicer 5-digit ID number(if applicable): 5-digit number box	
Company Contact Name: Text box	Title: Text box	Email: Text box	Telephone Number: Number box	
Alternate Contact Name for Application: Text box	Title: Text box	Email: Text box	Telephone Number: Number box	
Briefly describe your company's business plan strategy for applying for Fannie Mae approval:		Text box		
Does company have affiliates (parent or subsidiary entities with common ownership) engaged in mortgage lending or servicing?			Yes checkbox	No checkbox
Ultimate Parent Name: Text box		If Fannie Mae approved, 5-digit Seller/Servicer number: 5-digit number box		
Affiliate Name: Text box		If Fannie Mae approved, 5-digit Seller/Servicer number: 5-digit number box		
Provide the following information for company's principal / executive officers (e.g., CEO/President, CFO, Chief Risk Officer, Chief Information Officer, etc.)				
Full Name:	Title:	Primary Responsibility:	Email:	Telephone Number:
Text box	Text box	Text box	Text box	Number box
Text box	Text box	Text box	Text box	Number box
Text box	Text box	Text box	Text box	Number box



Text box	Text box	Text box	Text box	Number box
Text box	Text box	Text box	Text box	Number box
Text box	Text box	Text box	Text box	Number box

Ownership. Provide the following information for all persons (individual or entity) who directly or indirectly own 5% or more of company (“Owner”).

Owner/Partner Name:	Country of Domicile:	Ownership Interest:	If Partnership, Type of Partner:		
Text box	Text box	Number box %	N/A <input type="checkbox"/>	Managing Partner <input type="checkbox"/>	General Partner <input type="checkbox"/>
Text box	Text box	Number box %	N/A <input type="checkbox"/>	Managing Partner <input type="checkbox"/>	General Partner <input type="checkbox"/>
Text box	Text box	Number box %	N/A <input type="checkbox"/>	Managing Partner <input type="checkbox"/>	General Partner <input type="checkbox"/>
Text box	Text box	Number box %	N/A <input type="checkbox"/>	Managing Partner <input type="checkbox"/>	General Partner <input type="checkbox"/>
Text box	Text box	Number box %	N/A <input type="checkbox"/>	Managing Partner <input type="checkbox"/>	General Partner <input type="checkbox"/>

Has company or any of company’s principal officers, directors, or Owners (5% or more) **ever been:**

a) Convicted of a crime or named in a pending criminal proceeding (excluding traffic violations or other minor offenses)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, describe:	Text box	
b) Subject to any order, judgement, or decree enjoining any activities in connection with any type of business transaction (including the purchase or sale of a security) or acting as an investment adviser, underwriter, broker, dealer, financial institution, or any other business (including as an associated or affiliated person)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, describe:	Text box	
c) Suspended, terminated, debarred, or denied approval by any state or federal agency (HUD, GNMA, FHA/VA/USDA), mortgage insurance company, warehouse lender, secondary market investor (including Fannie Mae or Freddie Mac), conduit, or correspondent?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, describe:	Text box	
d) Insolvent, declared bankrupt, liquidated, subject to receivership for its business or assets, denied fidelity bond or mortgagee’s errors and omissions insurance coverage, made a general assignment for the benefit of creditors	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, describe:	Text box	

In the past 24 months, have any of the following been **threatened, pending, or concluded** against the company or its principal officers, directors or Owners (5% or more)?

a) Any investigation by state or federal banking or lending regulators, attorneys general, or consumer affairs/civil rights agencies, including HUD, US Department of Justice, Federal Trade Commission, or other federal or comparable state or local agencies? NOTE: Applicants with pending (open) regulatory or enforcement matters are encouraged to apply after the matter concludes.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, describe:	Text box	
b) Any claim or litigation alleging fair lending/servicing law violations (Fair Housing Act or ECOA), predatory lending, or claims under HOEPA or state anti-predatory lending laws?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, describe:	Text box	
c) Any litigation, actions, claims, inquiries, investigations, or other proceedings at law or in equity which reasonably may be expected to result in any material adverse effect on the financial or business condition or operations, of company? NOTE: Applicants with pending (open) matters are encouraged to apply after the matter concludes.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, describe:	Text box	



d) Any review, investigation, or sanction for violations related to the Anti-Money Laundering requirements of the Bank Secrecy Act?	Yes check box	No check box
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If yes, describe:

e) In the past 12 months , has the company experienced a security breach or cybersecurity incident that required the company to send notifications to affected individuals?	Yes check box	No check box
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If yes, describe:

Select Company Type :	Bank/Thrift	Credit Union	Mortgage Banker	Housing Finance Agency	Other (specify):
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Section II: Financial Condition Information

What is your company's fiscal year-end?	Month: <input type="text" value="Drop-down box, months"/>	Day: <input type="text" value="Drop-down box, 1 through 31"/>
	YTD (month-end or quarter-end) Enter all data in thousands (000) As of: ___/___/___ <input type="text" value="2-digit, 2-digit, 4-digit number boxes"/>	Fiscal Year-End (most recent) Enter all data in thousands (000) As of: ___/___/___ <input type="text" value="2-digit, 2-digit, 4-digit number boxes"/>
Total Assets	\$ <input type="text" value="Whole number box"/>	\$ <input type="text" value="Whole number box"/>
GAAP Net Worth	\$ <input type="text" value="Whole number box"/>	\$ <input type="text" value="Whole number box"/>
Less:		
Goodwill and other Intangibles (excluding MSRs)	\$ <input type="text" value="Whole number box"/>	\$ <input type="text" value="Whole number box"/>
Affiliate Receivables	\$ <input type="text" value="Whole number box"/>	\$ <input type="text" value="Whole number box"/>
Pledged Assets Net of Associated Liabilities	\$ <input type="text" value="Whole number box"/>	\$ <input type="text" value="Whole number box"/>
Adjusted Net Worth	\$ <input type="text" value="Whole number box"/>	\$ <input type="text" value="Whole number box"/>
Net Income or (Loss)	\$ <input type="text" value="Whole number box"/>	\$ <input type="text" value="Whole number box"/>
Capital Ratios for Commercial Banks and Thrifts:		
Total Risk-Based Capital (minimum 10%)	<input type="text" value="3-digit number box"/> %	<input type="text" value="3-digit number box"/> %
Tier 1 Risk-Based Capital (minimum 6%)	<input type="text" value="3-digit number box"/> %	<input type="text" value="3-digit number box"/> %
Tier 1 Common Risk-Based Capital (minimum 6.5%)	<input type="text" value="3-digit number box"/> %	<input type="text" value="3-digit number box"/> %
Tier 1 Leverage Capital (minimum 5%)	<input type="text" value="3-digit number box"/> %	<input type="text" value="3-digit number box"/> %
Capital Ratios for all Others:		
Adjusted Net Worth/Total Assets (Min. 7% for credit unions, 6% for all others)	<input type="text" value="3-digit number box"/> %	<input type="text" value="3-digit number box"/> %



Select how company submits required financial reports:	FDIC Call Report check box	NCUA Call Report check box	MBFRF check box (Required if not depository institution)	N/A check box
Does company have at least two (2) open warehouse or servicing advance lines of credit or repurchase facilities? List each open Warehouse Facility and Lender	Yes check box		No check box	
	Line Limit: \$ Whole number box		Warehouse Lender Name: Text box	
	Line Limit: \$ Whole number box		Warehouse Lender Name: Text box	
	Line Limit: \$ Whole number box		Warehouse Lender Name: Text box	
	Line Limit: \$ Whole number box		Warehouse Lender Name: Text box	
Does company's Fidelity Bond and Errors & Omission Insurance coverage meet requirements of Fannie Mae's <i>Selling Guide</i> , A3-5-02?	Yes check box		No check box	

Section III: Mortgage Loan Origination Information

Annual loan volume you anticipate selling to Fannie Mae in the first 12 months?	\$ Whole number box		
How long has your company been originating mortgage loans, if applicable?	3-digit number box years		2-digit number box months
How long has your company been purchasing closed mortgage loans, if applicable?	3-digit number box years		2-digit number box months
Does company close mortgage loans in its own name?	Yes check box	No check box	If no, specify name: Text box
Breakdown of company's origination channels:	Retail 3-digit number box %	Wholesale 3-digit number box %	Correspondent 3-digit number box %
Company's current secondary market outlets?	Freddie Mac check box	Federal Home Loan Bank (FHLB) check box	Aggregators check box
If originating mortgage loans: 1) Which loan origination system do you use?	Text box		
2) Which automated underwriting systems do you use?	Desktop Originator® check box	Desktop Underwriter® check box	Loan Advisor® check box
Provide the following single-family data:	Average loan size \$ Whole number box	Average LTV? 3-digit number box	Average credit score? 3-digit number box
What is your loan product mix?	Fixed rate: 3-digit number box %	Adjustable rate: 3-digit number box %	If other, specify type: 3-digit number box %
What are your loan options?	Purchase: 3-digit number box %		Refinance: 3-digit number box %
What are your loan types?	Agency Eligible/Qualified Mortgage: 3-digit number box %		Other/Non-QM: 3-digit number box %
List the states you originate or purchase mortgage loans:	Text box		
Is company licensed (or authorized) in each state?	Yes check box	No check box	If no, explain: Text box
Has company ever had a license for mortgage-lending or servicing denied, suspended, or revoked?	Yes check box	If yes, explain: Text box	No check box



Does company hedge its origination pipeline?	Yes check box	No check box	Via MBS forwards? check box	Yes check box	No check box	Via TBA forwards? check box	Yes check box	No check box
Is company currently engaged in securitizing mortgages loans?	Yes check box	No check box	Via Agency MBS?	Yes check box	No check box	If yes, which Agency? Text box		
Provide the following single-family volume data:								
Total dollar volume: \$ Whole number box	Volume Serviced In-House: \$ Whole number box	Volume Subserviced by others: \$ Whole number box	Origination volume for most recent year ended: \$ Whole number box	Production volume sold for most recent year ended: \$ Whole number box				
Are you originating eNotes and interested in obtaining approval to sell eNotes to Fannie Mae? If yes...	Yes check box			No check box				
eNote Information								
What is your MERS Org ID?	7 Digit Numeric Value							
How many eNotes have you registered on the MERS eRegistry in the last 2 calendar years?	Number box							
If using a Delegatee for Transfer, what is the DFT's Org ID?	Null or 7 Digit Numeric Value							
What eClosing technology provider do you use?	Selected vendor from picklist							
What eNote technology provider do you use?	Selected vendor from picklist							
What eVault technology provider do you use?	Selected vendor from picklist							
Are you purchasing Third-Party Originated eNotes?	Yes check box			No check box				
Are your servicing partners approved to service eNotes for Fannie Mae?	Yes check box		No check box		N/A check box			
If using a Subservicer, what is their MERS Org ID?	Null or 7 Digit Numeric Value							
Section IV: Mortgage Loan Servicing Information								
List the state(s) in which your company owns or will own the mortgage servicing rights and/or services or will service mortgage loans:	Text Box							
Is your company licensed in all the above states?	Yes check box			No check box If no, explain: Text box				
Has your company ever had a state license suspended or revoked?	Yes check box		If yes explain: text box		No check box			
For loans sold to Fannie Mae, will you service in-house?	Yes check box		Identify company's servicing system: Text box		No check box			
Is company currently servicing loans?	Yes check box		If yes, for how many years? 3- digit number box		No check box			
Is company currently servicing its own portfolio?	Yes check box			No check box				
Check all investors your company currently servicing loans?	Freddie Mac check box		FHLB check box		Other investors check box		If others, specify: Text box	



If servicing, how is portfolio currently serviced:			
Serviced in-house by company:	UPB \$ Whole number box	Loan Count: Number box	Overall serious delinquency rate: 3-digit number box %
Subserviced for company by others:	UPB \$ Whole number box	Loan Count: Number box	Overall serious delinquency rate: 3-digit number box %
Provide the total volume of servicing for each category below. “Other Servicing” includes ALL mortgage loans secured by real property (single-family, multi-family, or commercial) and all loan products (HELOCs, reverse mortgages, construction-to-permanent), including government loans (FHA, VA, USDA).			
Total MSR's owned, including Other Servicing:	UPB \$ Whole number box	Loan Count: Number box	Serious delinquency rate: 3-digit number box %
Freddie Mac loans:	UPB \$ Whole number box	Loan Count: Number box	Serious delinquency rate: 3-digit number box %
Federal Home Loan Bank loans:	UPB \$ Whole number box	Loan Count: Number box	Serious delinquency rate: 3-digit number box %
Ginnie Mae loans:	UPB \$ Whole number box	Loan Count: Number box	Serious delinquency rate: 3-digit number box %
Private-Label Securities (PLS) or nonagency MBS, including Other Servicing:	UPB \$ Whole number box	Loan Count: Number box	Serious delinquency rate: 3-digit number box %
Provide company's single-family loan delinquency volume for the most recent year ended			
Year Ended: 4-digit number box			
Delinquency:	UPB:	Loan Count:	
30 Days:	\$ Whole number box	Number box	
60 Days:	\$ Whole number box	Number box	
90+ Days:	\$ Whole number box	Number box	
In Foreclosure:	\$ Whole number box	Number box	
In Bankruptcy:	\$ Whole number box	Number box	
Are you interested in obtaining Fannie Mae approval for eNote servicing?	Yes check box		No check box
If yes...			
eNote Servicing Information			
What is your MERS Org ID?	7 Digit Numeric Value		
How many eNotes have you registered on the MERS eRegistry in the last 2 calendar years?	Number box		
If using a Delegatee for Transfer, what is the DFT's Org ID?	Null or 7 Digit Numeric Value		



What eVault technology provider do you use?	Selected vendor from picklist		
Do you use servicers who are approved to service eNotes for Fannie Mae?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
If using a Subservicer, what is their MERS Org ID?	Null or 7 Digit Numeric Value		

Section V: Operations Information

Key Functional Area	Response (Yes/No)	Total Employees	Department Lead's Name	Lead's Years of Experience	Title	Email	Telephone
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Does company have **experienced personnel** in **each** of the following key functional areas?

Internal Audit	Yes <input type="checkbox"/>	3-digit number box	John smith	3-digit number box	Text box	Text box	Number box
	No <input type="checkbox"/>						
	If no, please explain						

If applying for **Seller approval**, does your company have **experienced personnel** in **each** of the following key functional areas?

Underwriting	Yes <input type="checkbox"/>	3-digit number box	Text box	3-digit number box	Text box	Text box	Number box
	No <input type="checkbox"/>						
	If no, explain						

Prefunding and Post-Closing Quality Control	Yes <input type="checkbox"/>	3-digit number box	Text box	3-digit number box	Text box	Text box	Number box
	No <input type="checkbox"/>						
	If no, explain						

Secondary Marketing	Yes <input type="checkbox"/>	3-digit number box	Text box	3-digit number box	Text box	Text box	Number box
	No <input type="checkbox"/>						
	If no, explain						

Technology	Yes <input type="checkbox"/>	3-digit number box	Text box	3-digit number box	Text box	Text box	Number box
	No <input type="checkbox"/>						
	If no, explain						

eNote/eVault Operations	Yes <input type="checkbox"/>	3-digit number box	Text box	3-digit number box	Text box	Text box	Number box
	No <input type="checkbox"/>						



	If no, explain						
If applying for Servicing approval , does company have experienced personnel in each of the following key areas?							
Investor Reporting, Reconciliation	Yes check box	3-digit number box	Text box	3-digit number box	Text box	Text box	Number box
	No check box						
	If no, explain						
Custodial Account Reconciliation	Yes check box	3-digit number box	Text box	3-digit number box	Text box	Text box	Number box
	No check box						
	If no, explain						
Cash Management	Yes check box	3-digit number box	Text box	3-digit number box	Text box	Text box	Number box
	No check box						
	If no, explain						
Subservicer Monitoring & Oversight	Yes check box	3-digit number box	Text box	3-digit number box	Text box	Text box	Number box
	No check box						
	If no, explain						
eNote/eVault Operations	Yes check box	3-digit number box	Text box	3-digit number box	Text box	Text box	Number box
	No check box						
	If no, explain						
	No check box						
	If no, explain						
Name of Internal Audit vendor, if outsourced:			Text Box				
Name of Post-Closing Quality Control vendor, if outsourced:			Text Box				
Name of Prefunding Quality Control vendor, if outsourced:			Text Box				
Name of Subservicer Oversight Quality Control vendor, if outsourced:			Text Box				



Does company have a complaint management policy for responding to, managing and tracking consumer complaints from prospective and current borrowers?	Yes check box	No check box
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Background Checks. Does company conduct background checks on employees who will be engaged in Fannie Mae-related loan origination or servicing activities, if applicable?	Yes check box	No check box
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Does company have **written policies and procedures** for **each** of the following key functional areas?

Bank Secrecy Act / Anti-Money Laundering Oversight	Yes check box	Internal Audit	Yes check box	Vendor Management	Yes check box
	No check box		No check box		No check box

Information Security Program, Business Continuity and Disaster Recovery Program	Yes check box	Anti-Fraud, including for contractors & third parties	Yes check box
	No check box		No check box

If applying for **Selling approval**, does company have **written policies and procedures** for **each** of the following key areas?

Underwriting	Yes check box	Appraisal Management	Yes check box	Prefunding Quality Control	Yes check box
	No check box		No check box		No check box

Post-Closing Quality Control	Yes check box	Third-Party Vendor Monitoring & Oversight	Yes check box	Secondary Marketing	Yes check box
	No check box		No check box		No check box

If applying for **Servicing approval**, does company have **written policies and procedures** for **each** of the following key areas?

Investor Reporting, Reconciliation	Yes check box	Custodial Account Reconciliation	Yes check box	Cash Management	Yes check box
	No check box		No check box		No check box

Escrow, Loan Administration, Customer Service	Yes check box	Collections, Loss Mitigation	Yes check box	Bankruptcy, Foreclosure, Post-Foreclosure	Yes check box
	No check box		No check box		No check box

Subservicer Monitoring & Oversight	Yes check box	eMortgage Servicing	Yes check box		
	No check box		No check box		

Section VI: Potential Conflicts of Interest (Dual Roles)

To the best of your knowledge, do any current employees (or their family members) serve as company officers?	Yes check box	No check box
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To the best of your knowledge, do any current board members (or their family members), serve as company officers?	Yes check box	No check box
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To the best of your knowledge, do any current employees (or their family members), own 5% or more of your company?	Yes check box	No check box
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To the best of your knowledge, do any current board members (or their family members) own 5% or more of your company?	Yes check box	No check box
To the best of your knowledge, do any current employees (or their family members) serve as board members?	Yes check box	No check box
To the best of your knowledge, do any current board members have family members that also serve as board members?	Yes check box	No check box
Does your company provide any goods and services to Fannie Mae as a vendor (not as a seller/servicer) for a fee?	Yes check box	No check box

Section VII: Certification and Signature

The Company (“Applicant”) represents, warrants and certifies that: (1) all information contained in this Application for approval together with all submissions in connection with the Application process (the “Application Package”) is, and will remain, true, complete, and accurate at all times from initial submission until the final approval decision by Fannie Mae, and (2) Applicant will promptly notify Fannie Mae in writing of any material change in the Application Package during this period until the final approval decision by Fannie Mae.

Applicant acknowledges and understands that (1) Fannie Mae will rely on the information submitted in the Application Package and that any misrepresentation or omission may constitute a civil or criminal violation and may result in denial of approval or, if Applicant is approved, suspension or termination of its approval as a Fannie Mae seller and/or servicer, and (2) Fannie Mae is under no obligation to approve any Application for approval as a seller and/or servicer.

Limitation on Application Withdrawal Requests. Applicant understands and agrees that once documentation in support of the Application is received, Fannie Mae will not grant a request to withdraw the Application and will instead issue a final approval decision. If approval is denied, Applicant must satisfy the waiting period before reapplying.

The undersigned individual signing this Application represents and certifies that the individual is duly authorized to execute this Certification on behalf of the Applicant and, if using an electronic signature, that the Applicant consents to the use of electronic records and signatures in Applicant’s transactions with Fannie Mae, including the Application Package, and intends to be bound by such electronic signature just as if it were an ink signature on paper.

Company Name (Applicant): Text box	
By Printed Name (Duly authorized): Text box	Title: Text box
Signature: Allow hand-written or electronic signature	Date: Date box
Fannie Mae reserves the right to change the information it requires for any Application at any time, regardless of the information requested in this Application.	