LOAN APPLICATION INVOICE

Invoice ID : #0101092025

INVOICE TO

BORROWER FIRST & LAST NAME
ENTITY NAME LLC/INC.
+123-456-7890

PUSHPAPER@REALONRISE.COM
567 SE Whitmore DR
Port St. Lucie, FL 34984

PRODUCT	PRICE	QTY	TOTAL
Application Fee	$ 50.00	1	$ 50.00
Credit Report	$ 70.00	1	$ 70.00
Appraisal Report	$TBD	1	$TBD
Appraisal Report - Reinspection	$TBD	1	$TBD

PAYMENT METHOD

Name Real on Rise Capital Inc.
Zelle PUSHPAPER@REALONRISE.COM
Bank Bank of America

SUB-TOTAL	120.00
TAX (10%)	$12.00
TOTAL	**$ 132.00**

Thank You For Your Business

Real on Rise Capital Inc.
NMLS 2493728

EQUAL HOUSING OPPORTUNITY

Loan #

Borrower Signature Authorization

Date:

Borrower(s):

Property Address:

Lender: NMLS #:

Broker: NMLS #:

I hereby authorize each of the above-named Broker and Lender, as applicable, and their agents or assigns, to verify my past and present employment earnings records, bank accounts, stock holdings, and any other assets needed to process my mortgage loan application. I further authorize Broker or Lender to order a consumer credit report and verify other credit information, including past and present mortgage and landlord references. I understand that a photocopy of this form will also serve as authorization.

The information Broker or Lender obtains is to be used in the processing of my mortgage loan application.

Signature	Date	Signature	Date
Borrower Name		Borrower Name	

PRIVACY NOTICE

This information is to be used by the agency collecting it or its assignees in determining whether you qualify as a prospective mortgagor under its program. It will not be disclosed outside the agency except as required by law. You do not have to provide this information, but if you do not, your application for approval as a prospective mortgagor may be delayed or rejected. The information requested in this form is authorized by Title 38, USC Chapter 37 (if VA); by 12 USC, Section 1701 et seq. (if HUD/VA); by 42 USC, Section 1452b (if HUD/CPD); and Title 42 USC, 1471 et seq. or 7 USC, 1921 et seq. (if USDA/FHA).

DISCLOSURE NOTICES

Loan #

Date:

Applicant(s):	**Property Address:**

AFFIDAVIT OF OCCUPANCY

Applicant(s) hereby certify and acknowledge that, upon taking title to the real property described above, their occupancy status will be as follows:

☐ Primary Residence - Applicant(s) shall occupy, establish, and use the Property as Applicant(s) principal residence within 60 days after closing and shall continue to occupy the Property as Applicant(s) principal residence for at least one year after the date of occupancy, unless Lender otherwise agrees in writing, which consent shall not be unreasonably withheld, or unless extenuating circumstances exist which are beyond Borrower's control.

☐ Secondary Residence - To be occupied by Applicant(s) at least 15 days yearly, as second home (vacation, etc.), while maintaining principal residence elsewhere. [Please check this box if you plan to establish it as your primary residence at a future date (e.g., retirement)].

☐ Investment Property - Not owner occupied. Purchased as an investment to be held or rented.

The Applicant(s) acknowledge it is a federal crime punishable by fine or imprisonment, or both, to knowingly make any false statement concerning this loan application as applicable under the provisions of Title 18, United States Code, Section 1014.

APPLICANT SIGNATURE

CO-APPLICANT SIGNATURE

ANTI-COERCION STATEMENT

The insurance laws of this state provide that the lender may not require the applicant to take insurance through any particular insurance agent or company to protect the mortgaged property. The applicant, subjected to the rules adopted by the Insurance Commissioner, has the right to have the insurance placed with an insurance agent or company of his choice, provided the company meets the requirement of the lender. The lender has the right to designate reasonable financial requirements as to the company and the adequacy of the coverage.
I have read the foregoing statement, or the rules of the Insurance Commissioner relative hereto, and understand my rights and privileges and those of the lender relative to the placing of such insurance.
I have selected the following agencies to write the insurance covering the property described above:

Insurance Company Name

Agent

Agent's Address

Agent's Telephone Number

APPLICANT SIGNATURE

CO-APPLICANT SIGNATURE

FAIR CREDIT REPORTING ACT

An investigation will be made as to the credit standing of all individuals seeking credit in this application. The nature and scope of any investigation will be furnished to you upon written request made within a reasonable period of time. In the event of credit denial due to an unfavorable consumer report, you will be advised of the identity of the Consumer Reporting Agency making such report and of your right to request within sixty (60) days the reason for the adverse action, pursuant to provisions of section 615(b) of the Fair Credit Reporting Act.

APPLICANT SIGNATURE

CO-APPLICANT SIGNATURE

FHA LOANS ONLY

IF YOU PREPAY YOUR LOAN ON OTHER THAN THE REGULAR INSTALLMENT DATE, YOU MAY BE ASSESSED INTEREST CHARGES UNTIL THE END OF THAT MONTH. For all FHA mortgages closed on or after January 21, 2015. mortgagees may only charge interest through the date the mortgage is paid in full.

GOVERNMENT LOANS ONLY

RIGHT TO FINANCIAL PRIVACY ACT OF 1978 - This is a notice to you as required by the Right to Financial Privacy Act of 1978 that the Department of Housing and Urban Development or Department of Veterans Affairs has a right of access to financial records held by a financial institution in connection with the consideration of administration of assistance to you. Financial records involving your transaction will be available to the Department of Housing and Urban Development or Department of Veterans Affairs without further notice or authorization but will not be disclosed or released to another Government agency or Department without your consent except as required or permitted by law.

APPLICANT SIGNATURE

CO-APPLICANT SIGNATURE

Loan #

Equal Credit Opportunity Act Notice

Loan Number:

Property Address:

Borrower(s):

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The Federal agency that administers compliance with this law concerning this creditor is:

You are not required to reveal income from alimony, child support, or separate maintenance payments if you do not want the creditor to consider it in determining your creditworthiness.

However, if you choose to include income derived from such sources on your application or are relying on such income as a basis for repayment of the loan, we may inquire about and take into account the nature and consistency of such income in determining your qualification for the loan.

I/We acknowledge receipt of this notice under the Equal Credit Opportunity Act.

Signature	Date	Signature	Date
Borrower Name		Borrower Name	

Loan #

MORTGAGE FRAUD IS INVESTIGATED BY THE FBI

Mortgage Fraud is investigated by the Federal Bureau of Investigation and is punishable by up to 30 years in federal prison or $1,000,000 fine, or both. It is illegal for a person to make any false statement regarding income, assets, debt, or matters of identification, or to willfully overvalue any land or property, in a loan and credit application for the purpose of influencing in any way the action of a financial institution.

Some of the applicable Federal criminal statutes which may be charged in connection with Mortgage Fraud include:

18 U.S.C. § 1001 - Statements or entries generally
18 U.S.C. § 1010 - HUD and Federal Housing Administration Transactions
18 U.S.C. § 1014 - Loan and credit applications generally
18 U.S.C. § 1028 - Fraud and related activity in connection with identification documents
18 U.S.C. § 1341 - Frauds and swindles by Mail
18 U.S.C. § 1342 - Fictitious name or address
18 U.S.C. § 1343 - Fraud by wire
18 U.S.C. § 1344 - Bank Fraud
42 U.S.C. § 408(a) - False Social Security Number

Signature	Date	Signature	Date
Borrower Name		Borrower Name	

Loan #

Mortgage Loan Origination Agreement

Borrower:
Address:

You have requested that

("Broker") assist you in applying for a mortgage loan from a lender we work with, on the terms and conditions you and lender may agree to. We are licensed as a mortgage loan originator or broker under applicable laws to assist you in this process.

In order to have a clear mutual understanding of our relationship and our compensation as your Broker, we both agree as follows:

1. Nature of Our Relationship. As your Broker, we are acting as an independent contractor and not as your legal agent. Our goal is to assist you in meeting your financial needs, but you will be responsible to decide whether to proceed with any particular loan product or lender. If you proceed with a loan, you will sign the required loan documents and will be responsible for all terms and conditions of the loan. As an independent contractor, we may work with various lenders, but we do not work with all lenders in the market and cannot guarantee that the lenders we work with have the lowest rates or the best available terms in the market.

2. Our Compensation. The lenders we work with generally provide their loan products to us at a wholesale rate. The retail price we offer you (including your interest rate, total points and fees) includes our compensation and is based on the lender's available programs in which you have expressed an interest and for which you qualify.

Our compensation may be paid by you or by the lender. If our compensation is paid by you, the lender is prohibited from compensating us on the same transaction. If our compensation is paid by the lender, we are prohibited from receiving compensation from you or from any other source on the same transaction. We may also be prohibited from reducing or increasing our compensation on lender paid transactions. In some cases, a lender may also compensate us based on the value of the loan or other goods or services we provide to the lender.

3. Other Fees. You may be required to pay certain third party fees, including to credit reporting agencies, appraisers, and title companies. If we collect such fees from you on a third party's behalf, we will not increase the amount or retain any portion as compensation.

Broker:
Address
NMLS #:
Phone:
Loan Originator:
NMLS #:

_____ _____
Signature Date

_____
Broker or Authorized Signatory Name

I/We have read and agree to the terms of this agreement.

_____ _____ _____ _____
Signature Date Signature Date

_____ _____
Borrower Name Borrower Name

Loan #

Patriot Act Information Disclosure

Loan Number:

Borrower(s):

Property Address:

Lender: NMLS #:

Loan Originator:

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify and record information that identifies each person who opens an account.

What this means for you: When you apply for a loan, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

I/We hereby acknowledge receipt of this disclosure and consent to use of the information as described above.

Signature	Date	Signature	Date
Borrower Name		Borrower Name	

Loan #

Rate Lock/Float Agreement

Date:

Borrower:

Lender: NMLS #:

Broker: NMLS #:

You have applied for a mortgage loan through the Broker indicated above and you may have the option to lock your interest rate or let the interest rate float.

Loan #:
Property:
Interest Rate: %
Type of Loan:
Loan Term:
Lock Fee: $
Discount Points, totaling , constituting **%** of the loan amount
Other Terms:

The interest rate and terms quoted above are based upon the current rate and terms available. Please be aware that neither Broker nor Lender can anticipate whether interest rates will rise or fall before your loan closes, and your decision to lock or float should be based on your own evaluation of the market and your personal circumstances.

I/We wish to (select one of the following):

☐ **Lock our Interest Rate**. I/We have chosen to lock our interest rate, and understand and agree that:

- We will be required to pay the Lock Fee, Discount Points, or other amount listed above.
- Locking the interest rate does not constitute loan approval and does not guarantee I/we will qualify for the specific loan or loan program.
- If our request for a loan is denied, the interest rate lock will no longer be valid, and will not be transferable to other loan programs or lenders.
- Broker does not guarantee this lock agreement and Broker makes no warranties regarding any lender's ability or willingness to deliver the lock.
- This agreement to lock the interest rate expires at on .
- If the loan does not close prior to the expiration date, for any reason, I/we will need to re-lock the loan with a new lock agreement, which may be at a higher rate than the rate listed above.
- Lenders reserve the right to discontinue a loan program at any time, including the loan applied for above.
- Any change in the conditions or circumstances surrounding our loan could also result in an increase in the interest rate.
- If the loan does not close before the expiration date through no substantial fault of ours, I/we may withdraw our application by delivering written notice to the Lender, and Lender will promptly refund any lock fee paid. However, if the loan is approved, but I/we fail to close on time, the lock fee will not be refunded.

☐ **Float our Interest Rate.** I/We have chosen to float our interest rate and understand and agree that:

- The interest rate on our loan is subject to change at any time before closing, without notification.
- We may still have the opportunity to lock the interest rate prior to closing by contacting our Broker or loan officer.
- If we choose to lock our interest rate at a later time, we will be required to enter into a similar rate lock agreement, based on the rates available at the time, which may be higher than the interest rate listed above.

ACKNOWLEDGMENT

I/We have read and have understood the terms of this agreement and have elected to lock or float the interest rate for our loan, as selected above.

Signature	Date	Signature	Date
Borrower Name		Borrower Name	

Form **SSA-89** (04-2023)
Discontinue Prior Editions
Social Security Administration

Loan #

OMB No.0960-0760

Authorization for the Social Security Administration (SSA) To Release Social Security Number (SSN) Verification

Printed Name:	Date of Birth:	Social Security Number:

Reason for authorizing consent: (Please select one)

- ☐ To apply for a mortgage
- ☐ To apply for a loan
- ☐ To meet a licensing requirement
- ☐ To open a bank account
- ☐ To open a retirement account
- ☐ Other
- ☐ To apply for a credit card
- ☐ To apply for a job

With the following company ("the Company"):

Company Name:

Company Address:

The name and address of the Company's Agent (if applicable):

Agent's Name:

Agent's Address:

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. 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 one-time use. 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):

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). We may also share your information for the following purposes, called routine uses: - To contractors and other Federal agencies, as necessary, to assist us in efficiently administering our programs; and - To student volunteers, persons working under a personal services contract, and others, when they need access to information in our records in order to perform their assigned agency duties. 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, as published in the Federal Register (FR) on December 29, 2010, at 75 FR 82121. Additional information, and a full listing of all our SORNs, is available on our website at www.saa.gov/privacy.

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 (OMB) control number. We estimate that it will take about 20 minutes to read the instructions, gather the facts, and answer the questions. ***Send only comments regarding this burden estimate or any other aspect of this collection, including suggestions for reducing this burden to:*** SSA, 6401 Security Blvd., Baltimore, MD 21235-6401. **.**

----------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 http://www.ssa.gov/cbsv/docs/SampleUserAgreement.pdf.