

Borrower Name

Date

## Broker Information

Broker Company Name

Broker Name

Phone Number

Email

Company Address

City

State

Zip

Advancial Account Executive Name

Phone Number

Email

## 2 Loan Purpose

Type:  Purchase  Rate Term Refinance  Cash Out Refinance  Delayed FinancingUnit Count:  1  2  3-4Occupancy:  Owner Occupied  2nd Home  InvestmentSecond Lien/CLTV Needed:  Y  NARM Product:  3/1  5/1  7/1Escrow Waiver:  Y  N If yes buyout = .25bps in feeCompensation:  Lender Paid Compensation  Borrower Paid Compensation

## 3 Reason For Submission/Exception

*Check all that apply.*

- |   |  |
|---|--|
| <input type="checkbox"/> Jumbo Cash Out                           | <input type="checkbox"/> No Credit or Limited Credit   |
| <input type="checkbox"/> Non-Warrantable Condo, Co-op or Condotel | <input type="checkbox"/> Work Visa/Student Visa/EAD Card/DACA or other Immigrant Documentation |
| <input type="checkbox"/> Warrantable Condo                        | <input type="checkbox"/> Foreign National  |
| <input type="checkbox"/> Asset Depletion                          | <input type="checkbox"/> Removal of Departing Residence from DTI                               |
| <input type="checkbox"/> Non-Occupant Co-Borrower                 | <input type="checkbox"/> RSU or other stock awards used as income                              |
| <input type="checkbox"/> Acreage or Hobby Farm                    | <input type="checkbox"/> Unique Income Calculation Required                                    |
| <input type="checkbox"/> Other Unique Property                    | <input type="checkbox"/> One year tax return program   |

Other exception or notes:

## 4 Signature

I, the undersigned certify that to the best of my knowledge and belief, the information on this form and any attachments are true and correct.

Signature

Date

Printed Name