



**BROKER ANNUAL RECERTIFICATION**

NMLS #: \_\_\_\_\_ Account Executive: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

- |   |     |    |
|---|-----|----|
| 1. Has your company moved within the past year?<br>If yes, please provide an updated W-9.   | YES | NO |
| 2. Has ownership in your company changed since you were approved with Nations Direct Mortgage? If so, please provide updated Articles of Incorporation/Operating Agreement and Authorization Form.<br>Note: Additional information may be required. | YES | NO |
| 3. Have there been any material changes in the structure of your company?   | YES | NO |
| 4. Is your company or owners subject to any bankruptcy proceedings?   | YES | NO |
| 5. Has your company, owner(s), or employee(s) been sanctioned or disciplined by any state or regulatory agency?   | YES | NO |
| 6. Is your company or owner(s) involved in any pending litigation?  | YES | NO |
| 7. Has your approval with any Agency or Investor ever been canceled or suspended?   | YES | NO |

If you answered "yes" to any of the above questions please explain.

The broker hereby certifies that all information provided is true and accurate and that no material changes have occurred that would impact their approval with Nations Direct Mortgage. The broker also authorizes Nations Direct Mortgage to perform all necessary background checks.

Documentation Requirements:

- Annual Recertification Form
- Current P&L and Balance Sheet
- Authorization Form (For all owners owning 10% or more of the company)

\_\_\_\_\_  
Broker of Record/Owner

\_\_\_\_\_  
Date



**AUTHORIZATION FORM**

Required to be executed by broker of record and all owners with 10% or more ownership.

**PLEASE COMPLETE THE INFORMATION BELOW AND CERTIFY THE FOLLOWING:**

I certify that I am duly authorized to complete this application and grant consent on behalf of the firm named herein for the purposes of applying to become a Nations Direct Mortgage Business Partner. I certify all information contained in this Application for Business Partner Approval is true and correct in all respects. By signing below, I hereby give Nations Direct Mortgage authorization to obtain and/or verify information, including a credit report for the company and all executive officers and/or owners from any source regarding this application. Nations Direct Mortgage is also authorized to submit the name of the company and all employees of the company for screening through any and all mortgage industry background databases. The undersigned hereby releases, discharges and exonerates any person or entity providing information to Nations Direct Mortgage in connection with this application and any recipient of such information, including Nations Direct Mortgage or its representatives, from any and all liability of every nature and kind arising from or in connection with the furnishing, receipt, and review of such information.

Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Tax ID: \_\_\_\_\_

Name (First & Last): \_\_\_\_\_ SSN: \_\_\_\_\_  
Title: \_\_\_\_\_ DOB (XX/XX/XXXX): \_\_\_\_\_  
Phone Number: \_\_\_\_\_ % Owned Residence \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

Signature Required \_\_\_\_\_

Name (First & Last): \_\_\_\_\_ SSN: \_\_\_\_\_  
Title: \_\_\_\_\_ DOB (XX/XX/XXXX): \_\_\_\_\_  
Phone Number: \_\_\_\_\_ % Owned Residence \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

Signature Required \_\_\_\_\_

Name (First & Last): \_\_\_\_\_ SSN: \_\_\_\_\_  
Title: \_\_\_\_\_ DOB (XX/XX/XXXX): \_\_\_\_\_  
Phone Number: \_\_\_\_\_ % Owned \_\_\_\_\_  
Residence Address: \_\_\_\_\_  
City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

Signature Required \_\_\_\_\_

Name (First & Last): \_\_\_\_\_ SSN: \_\_\_\_\_  
Title: \_\_\_\_\_ DOB (XX/XX/XXXX): \_\_\_\_\_  
Phone Number: \_\_\_\_\_ % Owned \_\_\_\_\_  
Residence Address: \_\_\_\_\_  
City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

Signature Required \_\_\_\_\_