For Use as a Worksheet Only -- Do Not Send to the Department!

State of New Jersey
Department of Banking & Insurance

Annual Report Worksheet for Correspondent Residential Mortgage Lenders

Year Ending December 31, 2015

New Jersey Department of Banking & Insurance
Division of Banking
Attn: Kristen Graham -- 5th floor
20 West State Street
Trenton, NJ 08625-0040

NMLS Entity ID Number: _____

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Licensee Demographics

The online application will populate the associated fields with the data currently found in the Nation-wide Mortgage Licensing System. *All information requested below is required by the online application (unless indicated otherwise.)*

NMLS Entity ID Number: _____ ***(This is the identification number found in the upper right-hand corner of your licensing certificate.)***

Licensee Name: _____

Business Address: _____

_____

_____

_____

Telephone Number: _____

FAX Number: _____

Business E-mail: _____

Every licensee **must** include their official business e-mail address in their annual report according to N.J.A.C. 3:23-4.1. Failure to supply your official business e-mail address will result in a failure to comply with the annual report filing.

Note: All licensees who were actively licensed in New Jersey for any period of time from January 1, 2015 through December 31, 2015 are required to file an annual report. You are required to file an annual report even if you did no business in 2015. Audited financial statements are not required to complete your annual report.

If you were actively licensed on December 31, 2015, your annual report must reflect the total activity of your New Jersey business as of the end of 2015.

If you surrendered your license during 2015, your annual report must reflect the total activity of your New Jersey business as of the date of surrender.

Your annual report should only reflect the amount of closed loans with New Jersey consumers.

If you actively held two or more New Jersey licenses during 2015, you must file a separate annual report for each type of license.

NMLS Entity ID Number: _____

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Balance Sheet
as of 12/31/2015 or Close of Business

Balance Sheet Instructions

Use the following pages to collect the financial information that will be entered into the online application as part of your balance sheet. *When entering data into the online application, please remember these important points*:

- Financial statements can be consolidated for the entire company… they do not have to be New Jersey specific.
- Round all amounts to the nearest whole US dollar, and do not enter any commas or periods.
- The assets section of the balance sheet contains an "Other Assets" line. If you do not see an appropriate entry for an account on the assets screen, clicking the "Other Assets" link will display a new screen that allows you to enter the description and amount for any account not described on the assets page. The total calculated on the "Other Assets" page will be automatically included on the assets page at the "Other Assets" line. These worksheets are organized in a similar fashion.
- The liabilities section of the balance sheet contains an "Other Liabilities" line. If you do not see an appropriate entry for an account on the liabilities screen, clicking the "Other Liabilities" link will display a new screen that allows you to enter the description and amount for any account not described on the liabilities page. The total calculated on the "Other Liabilities" page will be automatically included on the liabilities page at the "Other Liabilities" line. These worksheets are organized in a similar fashion.
- When entering "Other Assets" or "Other Liabilities", you may organize and combine similar accounts to correspond with your personal accounting needs.
- The stockholders' equity section of the balance sheet contains an "Other Stockholders' Equity" line. If you do not see an appropriate entry for certain accounts on the stockholders' equity screen, add those accounts and enter the total amount on the "Other Stockholders' Equity" line. There is no need to provide detailed descriptions for those entries.
- The online application does not currently provide a facility for entering contra-accounts or other negative amounts into the balance sheet. Instead, you must net any accounts that have a corresponding contra-account, and enter only the net amount into the balance sheet.

  Example: If Total Fixed Assets is $100,000, and Total Accumulated Depreciation is ($10,000), enter $90,000 as the Total Net Fixed Assets.

- Your Total Assets must equal your Total Liabilities plus your Total Stockholders' Equity. ***The online application will not allow you to submit your annual report if your balance sheet does not balance!***

NMLS Entity ID Number: _____

For Use as a Worksheet Only -- Do Not Send to the Department!

Balance Sheet
as of 12/31/2015 or Close of Business

ASSETS

Line	Description of Asset	Whole Dollar Amount
1	Cash and Cash Equivalents	
2	Cash and Cash Equivalents - Restricted	
3	Deposits	
4	Mortgage Loans Held for Sale	
5	Mortgage Backed Securities Held for Sale	
6	Mortgage Servicing Rights	
7	Securities Purchased Under Agreements to Resell	
8	Derivative Financial Instruments	
9	Accounts Receivable	
10	Accrued Interest Receivable	
11	Due from Affiliates	
12	Prepaid Expenses	
13	Loans Held for Investment	
14	Investments in Other Financial Instruments	
15	Short Term Investments	
16	Furniture & Fixtures	
17	Property, Plant & Equipment	
18	Goodwill & Other Intangible Assets	
19	Deferred Taxes	
20	Other Assets *(Use attached Schedule A-1. Enter the total from Schedule A-1 here.)*	
21	**Total Assets** ***(Add all lines above.)***	

NMLS Entity ID Number: _____

For Use as a Worksheet Only -- Do Not Send to the Department!

Balance Sheet
as of 12/31/2015 or Close of Business

Schedule A-1 – Other Assets
(make additional copies, if needed)

Description of Other Assets	Whole Dollar Amount
Total Other Assets ***(Add all lines above and also enter this total on line 20 of the Assets page of the Balance Sheet.)***	

NMLS Entity ID Number: _____

For Use as a Worksheet Only -- Do Not Send to the Department!

Balance Sheet
as of 12/31/2015 or Close of Business

LIABILITIES

Line	Description of Liability	Whole Dollar Amount
1	Accounts Payable and Accrued Expenses	
2	Accrued Interest Payable	
3	Commercial Paper	
4	Warehouse Facility	
5	Escrow Liabilities	
6	Drafts Payable	
7	Bank Credit Line	
8	Reverse Repurchase Agreements	
9	Derivative Financial Instruments	
10	Collateralized Debt Obligations	
11	Credit Facilities on Mortgage Loans Held for Sale	
12	Notes Payable	
13	Income Taxes Payable	
14	Reserve for Loan Loss	
15	Recourse Reserve Related to Loans Sold	
16	Deferred Revenue	
17	Capital Leases	
18	Deferred Taxes	
19	Other Liabilities *(Use attached Schedule L-1. Enter the total from Schedule L-1 here.)*	
20	**Total Liabilities** ***(Add all lines above.)***	

NMLS Entity ID Number: _____

For Use as a Worksheet Only -- Do Not Send to the Department!

Balance Sheet
as of 12/31/2015 or Close of Business

Schedule L-1 – Other Liabilities
(make additional copies, if needed)

Description of Other Liabilities	Whole Dollar Amount
Total Other Liabilities *(Add all lines above and also enter this total on line 19 of the Liabilities page of the Balance Sheet.)*	

NMLS Entity ID Number: _____

For Use as a Worksheet Only -- Do Not Send to the Department!

Balance Sheet
as of 12/31/2015 or Close of Business

STOCKHOLDERS' EQUITY

Line	Description of Stockholders' Equity	Whole Dollar Amount
1	Common Stock, Par Value	
2	Preferred Stock, Par value	
3	Additional Paid-in Capital	
4	Retained Earnings	
5	Other Stockholders' Equity	
6	**Total Stockholders' Equity** *(Add all lines above.)*	
7	**Total Liabilities** *(From line 20 of the Liabilities page of the Balance Sheet.)*	
8	**Total Liabilities and Stockholders' Equity** *(Add line 6 and line 7.)*	
9	**Total Assets** *(From line 21 of the Assets page of the Balance Sheet.)*	

NOTE: Your Total Assets (line 9) MUST EQUAL your Total Liabilities plus your Total Stockholders' Equity (line 8).

The online application <u>will not</u> allow you to submit your Annual Report if the balance sheet does not balance.

NJ NMLS Entity ID Number: _____

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NET TANGIBLE CAPITAL CALCULATION
for Correspondent Residential Mortgage Lenders
as of 12/31/2015 or Close of Business

Dollar amounts that are encumbered may be deducted from the Total Stockholders' Equity in order to calculate the Net Tangible Capital.

Line			Whole Dollar Amount
1	Total Capital at the End of the Year *(From line 6 of the Stockholders' Equity page of the Balance Sheet.)*		
	Description of Deduction	**Whole Dollar Amount**	
2	Assets Pledged to Secure Obligations		
3	Assets Due from Parents or Affiliates		
4	Market Adjustment to Securities		
5	Market Adjustment to Repossessed Assets		
6	Investments in Subsidiaries		
7	Goodwill and Other Intangibles		
8	Value of Servicing Contracts (NJ Loans)		
9	Other Deductions		
10	**Total Deductions** ***(Add all deductions above.)***		
11	**Total Net Tangible Capital** ***(Subtract line 10 from line 1.)***		

NOTE: The Total Net Tangible Capital calculated above will be used in the calculation of your Net Worth Requirement on the following page.

NJ NMLS Entity ID Number: _____

For Use as a Worksheet Only -- Do Not Send to the Department!

NET WORTH CALCULATION
for Correspondent Residential Mortgage Lenders
as of 12/31/2015 or Close of Business

The net worth requirement for your business is based on the standard associated with the license you actively held during 2015.

1	**Total Net Worth Requirement for a…** **Correspondent Residential Mortgage Lender**	**$ 150,000**
2	**Reported Total Net Tangible Capital** ***(From line 11 of the Net Tangible Capital Calculation page.)***	

The amount of your Total Net Tangible Capital (line 2) must be sufficient to meet your Total Net Worth Requirement (line 1). The online application will automatically calculate whether or not your Total Net Worth Requirement has been satisfied.

NJ NMLS Entity ID Number: _____

For Use as a Worksheet Only -- Do Not Send to the Department!

Income Statement
as of 12/31/2015 or Close of Business

REVENUE

Line	Description of Revenue	Whole Dollar Amount
1	Loan Origination Fees (Lender Paid)	
2	Loan Servicing Fees	
3	Interest Income	
4	Title Fees	
5	Appraisal Fees	
6	Broker Fee Income (Borrower Paid)	
7	Gain on Sale of Mortgage Loans	
8	Gain on Sale of Mortgage Backed Securities and Derivatives	
9	Gain on Securitizations of Mortgage Loans	
10	Unrealized Gain on Mortgage Backed Securities & Derivatives	
11	Other Fees	
12	Insurance Premium Income	
13	Other Revenue *(Use attached Schedule R-1. Enter the total from Schedule R-1 here.)*	
14	**Total Revenue** ***(Add all lines above.)***	

NJ NMLS Entity ID Number: _____

For Use as a Worksheet Only -- Do Not Send to the Department!

Income Statement
as of 12/31/2015 or Close of Business

Schedule R-1 – Other Revenue
(make additional copies, if needed)

Description of Other Revenue	Whole Dollar Amount
Total Other Revenue *(Add all lines above and also enter this total on line 13 of the Revenue page.)*	

NJ NMLS Entity ID Number: _____

For Use as a Worksheet Only -- Do Not Send to the Department!

Income Statement
as of 12/31/2015 or Close of Business

EXPENSES

Line	Description of Expenses	Whole Dollar Amount
1	Compensation & Benefits	
2	Loss on Securities	
3	Net Provision for Losses	
4	Amortization of Mortgage Servicing Rights	
5	Impairment Recovery of Mortgaging Servicing Rights	
6	Interest Expense	
7	Occupancy and Related Office Expenses	
8	Credit Reports	
9	Professional Fees	
10	Data Processing & Communications	
11	Advertising & Promotions	
12	Telephone	
13	Travel & Entertainment	
14	Insurance	
15	Depreciation & Amortization	
16	Office Supplies	
17	Other Expenses *(Use attached Schedule X-1. Enter the total from Schedule X-1 here.)*	
18	**Total Expenses** ***(Add all lines above.)***	

NJ NMLS Entity ID Number: _____

For Use as a Worksheet Only -- Do Not Send to the Department!

Income Statement
as of 12/31/2015 or Close of Business

Schedule X-1 – Other Expenses
(make additional copies, if needed)

Description of Other Expenses	Whole Dollar Amount
Total Other Expenses *(Add all lines above and also enter this total on line 17 of the Expenses page.)*	

NJ NMLS Entity ID Number: _____

For Use as a Worksheet Only -- Do Not Send to the Department!

Income Statement
as of 12/31/2015 or Close of Business

SUMMARY

Line	Description of Summary Item	Whole Dollar Amount
1	Total Revenue *(From line 14 of the Revenue page)*	
2	Total Expenses *(From line 18 of the Expense page)*	
3	Net Income Before Taxes *(Subtract line 2 from line 1)*	
4	Income Taxes	
5	**Total Net Income** ***(Subtract line 4 from line 3)***	

NJ NMLS Entity ID Number: _____

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STATEMENT OF CAPITAL
for Correspondent Residential Mortgage Lenders
as of 12/31/2015 or Close of Business

Use the following pages to collect the financial information that will be entered into the online application as your statement of capital. *When entering data into the online application, please remember these important points*:

- If you submitted your annual report with the State of New Jersey electronically last year, then the online application will automatically fill in the Total Capital at the Beginning of the Year (line 1) from the Total Stockholders' Equity reported last year. Please verify that this amount is correct. If the amount shown is incorrect, or if it is missing, please enter the appropriate amount.
- Round all amounts to the nearest whole US dollar, and do not enter any commas or periods.
- The additions to capital section of the statement contains an "Other Additions" line. If you do not see an appropriate entry for an addition on the screen, clicking the "Other Additions" link will display a new screen that allows you to enter the description and amount for any addition not described on the statement of capital page. The total calculated on the "Other Additions" page will be automatically included on the statement of capital page at the "Other Additions" line. These worksheets are organized in a similar fashion.
- The deductions to capital section of the statement contains an "Other Deductions" line. If you do not see an appropriate entry for a deduction on the screen, clicking the "Other Deductions" link will display a new screen that allows you to enter the description and amount for any deduction not described on the statement of capital page. The total calculated on the "Other Deductions" page will be automatically included on the statement of capital page at the "Other Deductions" line. These worksheets are organized in a similar fashion.
- When entering "Other Additions" or "Other Deductions", you may organize and combine similar items to correspond with your personal accounting needs.
- Your Total Capital at the End of the Year must equal your Total Stockholders' Equity. ***The online application will not allow you to submit your annual report if your statement of capital does not balance!***

NJ NMLS Entity ID Number: _____

For Use as a Worksheet Only – Do Not Send to the Department!

STATEMENT OF CAPITAL
for Correspondent Residential Mortgage Lenders
as of 12/31/2015 or Close of Business

Line			Whole Dollar Amount
1	Total Capital at the Beginning of the Year 2015		
	Additions to Capital	**Whole Dollar Amount**	
2	Total Net Income *(From line 5 of the Income Statement Summary Page)*		
3	Common Stock Issued		
4	Preferred Stock Issued		
5	Other Additions *(Use attached Schedule S-1. Enter the total from Schedule S-1 here.)*		
6	**Total Additions** ***(Add lines 2 through 5.)***		
6a	**Subtotal Capital** ***(Add line 1 and line 6.)***		
	Deductions to Capital	**Whole Dollar Amount**	
7	Cash Dividends on Stock		
8	Partnership Withdrawals		
9	Proprietor's Withdrawals		
10	Other Deductions *(Use attached Schedule S-2. Enter the total from Schedule S-2 here.)*		
11	**Total Deductions** ***(Add lines 7 through 10.)***		
12	**Total Capital at the End of the Year** ***(Subtract line 11 from line 6a.)***		
13	**Total Stockholders' Equity** ***(From line 6 of the Stockholders' Equity page of the Balance Sheet.)***		

NOTE: Your Total Capital at the End of the Year (line 12) MUST EQUAL your Total Stockholders' Equity (line 13)

The online application <u>will not</u> allow you to submit your Annual Report if the Total Capital at the End of the Year is out of balance with the Total Stockholders' Equity.

NJ NMLS Entity ID Number: _____

For Use as a Worksheet Only -- Do Not Send to the Department!

Statement of Capital
as of 12/31/2015 or Close of Business

Schedule S-1 – Other Additions
(make additional copies, if needed)

Description of Other Additions	Whole Dollar Amount
Total Other Additions *(Add all lines above and also enter this total on line 5 of the Statement of Capital page.)*	

NJ NMLS Entity ID Number: _____

For Use as a Worksheet Only -- Do Not Send to the Department!

Statement of Capital
as of 12/31/2015 or Close of Business

Schedule S-2 – Other Deductions

(make additional copies, if needed)

Description of Other Deductions	Whole Dollar Amount
Total Other Deductions *(Add all lines above and also enter this total on line 10 of the Statement of Capital page.)*	

NJ NMLS Entity ID Number: _____

For Use as a Worksheet Only -- Do Not Send to the Department!

Warehouse Lines & Lines of Credit Section

Creditor Detail Information

as of 12/31/2015 or Close of Business

(make additional copies, if needed)

Please enter the requested information for all borrowings as of December 31, 2015.

Name of Creditor:						
Address of Creditor:						
	City:		**State:**		**ZIP:**	
Total Dollar Amount Available:			**Total Dollar Amount Borrowed:**			
Name of Creditor:						
Address of Creditor:						
	City:		**State:**		**ZIP:**	
Total Dollar Amount Available:			**Total Dollar Amount Borrowed:**			
Name of Creditor:						
Address of Creditor:						
	City:		**State:**		**ZIP:**	
Total Dollar Amount Available:			**Total Dollar Amount Borrowed:**			
Name of Creditor:						
Address of Creditor:						
	City:		**State:**		**ZIP:**	
Total Dollar Amount Available:			**Total Dollar Amount Borrowed:**			
Name of Creditor:						
Address of Creditor:						
	City:		**State:**		**ZIP:**	
Total Dollar Amount Available:			**Total Dollar Amount Borrowed:**			

NJ NMLS Entity ID Number: _____

For Use as a Worksheet Only -- Do Not Send to the Department!

Warehouse Lines & Lines of Credit Section

Borrowing Summary
as of 12/31/2015 or Close of Business

Please provide the grand totals from any Creditor Detail Information pages previously completed:

	Whole Dollar Amount
Grand Total Amount Available	
Grand Total Amount Borrowed	

NJ NMLS Entity ID Number: _____

For Use as a Worksheet Only – Do Not Send to the Department!

Lending Activity Section

New Jersey Sub-prime Loans Summary
as of 12/31/2015 or Close of Business

For the purposes of this annual report, a sub-prime loan is a loan provided to a borrower with a ***FICO credit score of 659 or lower***.

Did your company offer Sub-prime Loans during 2015?

YES ☐ ***NO*** ☐

If the answer to the above question was *YES*,
what percentage of your total loan volume do Sub-prime Loans represent? **%**

Please provide the following information concerning your Sub-prime Loan business during 2015 ***for New Jersey consumers only***. Categorize all of your New Jersey sub-prime loans into either "Loans with an Adjustable Rate" or "Loans with a Fixed Rate." Include **all FHA loans** provided to a borrower with a ***FICO credit score of 659 or lower*** as part of this overall Sub-prime Loan summary.

Type of Sub-prime Loan	Total Number	Total Dollar Amount *(in whole US dollars)*
Sub-prime Loans with an Adjustable Rate		
Sub-prime Loans with a Fixed Rate for the term of the loan		
TOTAL Sub-prime Loans made in 2015 *(Add all lines above)*		

Note: The online application will automatically calculate the "TOTAL Sub-prime Loans made in 2015" from the two preceding entries. Please make sure that ALL New Jersey Sub-prime loans are represented by these totals.

NJ NMLS Entity ID Number: _____

For Use as a Worksheet Only -- Do Not Send to the Department!

Lending Activity Section

New Jersey Mortgage Lending Activity Summary
as of 12/31/2015 or Close of Business

The online application will ask you to provide the following information concerning your mortgage lending activities from January 1, 2015 through December 31, 2015, and ***for New Jersey consumers only.***

Type of Loan ***(include loans funded and loans brokered)*** *(Mobile Home and Manufactured Home activity **must** be included below)*	**Total Number**	**Total Dollar Amount** ***(in whole US dollars)***
First Mortgage (Purchase Money) Loans (***excluding*** FHA or VA loans)		
FHA & VA Loans (including FHA & VA refinances)		
Conventional Refinanced Loans		
Reverse Mortgages		
Secondary Mortgage Loans (include all Seconds here)		
Total New Jersey Mortgage Loans Made during 2015 ***(Add all lines above)***		

Note: The Total Dollar Amount of New Jersey Mortgage Loans Made during 2015 constitutes your Total Closed Loan Volume, which will be used in the calculation of your surety bond requirement and your total annual assessment.

Other Mortgage Lending Activity

Please enter the total number of New Jersey ***applications*** taken during the calendar year 2015. Only enter the number of New Jersey applications.

In the space provided, enter the total volume your company did in ALL OTHER STATES besides New Jersey.

NJ NMLS Entity ID Number: _____

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Lending Activity Section

New Jersey Loan Rates and Point Range Summary
as of 12/31/2015 or Close of Business

Conventional Loans

Please provide the lowest and highest rates charged for loans and points during 2015 for your **New Jersey consumers only**. This information must be provided regardless if you charge and/or collect these fees. When providing this information, only consider rates charged on ***Conventional Loans*** for a ***Single Family Primary Residence.***

Conventional Loan Summary		Rate Charged *(in percent)*
Loan Rates	Lowest Percentage Rate Charged during 2015	%
	Highest Percentage Rate Charged during 2015	%
Points	Lowest Percentage Rate Charged during 2015	%
	Highest Percentage Rate Charged during 2015	%

Sub-prime Loans

For the purposes of this annual report, a sub-prime loan is a loan provided to a borrower with a ***FICO credit score of 659 or lower***.

Please provide the lowest and highest rates charged for Sub-prime loans and points during 2015 for your **New Jersey consumers only**. This information must be provided regardless if you charge and/or collect these fees. When providing this information, only consider rates charged on ***Sub-prime Loans*** for a ***Single Family Primary Residence.***

If you made no sub-prime loans in 2015, you may skip this section of the online application.

Sub-prime Loan Summary		Rate Charged *(in percent)*
Loan Rates	Lowest Percentage Rate Charged during 2015	%
	Highest Percentage Rate Charged during 2015	%
Points	Lowest Percentage Rate Charged during 2015	%
	Highest Percentage Rate Charged during 2015	%

NJ NMLS Entity ID Number: _____

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Lending Activity Section

New Jersey Fees and Third Party Charges Summary
as of 12/31/2015 or Close of Business

Please provide the customary fee charged for each service during 2015. If the fee varied, please enter the amount being charged as of December 31, 2015. If the fee is based on the loan amount, please enter the fee that would have been charged on your ***average loan amount for 2015.*** When computing the average loan amount, only consider loans for a ***Single Family Primary Residence.***

The online application will not allow you to enter a range of charges. The online application contains an extra entry labeled "Other Fee and 3rd Party Charges". Clicking on this entry will display a new screen allowing you to enter the description and charge for any item not described on this page.

Description	Charge per Loan *(in whole US Dollars)*	Description	Charge per Loan *(in whole US Dollars)*
Application Fee		MIP & PMI Premium	
Appraisal Fee		Mortgage Broker Fee	
Attorney's Review Fee		Notary Fee	
Closing Inspection Fee		Origination Fee	
Commitment Fee		Pest Infestation or Control	
Courier Fee		Radon Test Fee	
Credit Report Fee		Recording Fee	
Discount Fee		Seller's Points or Closing Cost	
Fee for Inspections performed prior to closing		Survey Fee	
FHA Fee		Tax Service Fee	
Filing Fee		Title Insurance Premium	
Fire Insurance Premium		VA Funding Fee ***(VA Mortgages only)***	
Flood Certification Fee		Warehouse Fee	
Flood Insurance Fee		Wire Transfer Fee	
Flood Insurance Premium		Yield Spread Premium	
Lock-in Fee			

NJ NMLS Entity ID Number: _____

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Lending Activity Section

Other New Jersey Fees and Third Party Charges

(make additional copies, if needed)

Use this form to describe any fees or third party charges not found on the previous page. If the fee varied, please enter the amount being charged as of December 31, 2015. If the fee is based on the loan amount, please enter the fee that would have been charged on your ***average loan amount for 2015.*** When computing the average loan amount, only consider loans for a ***Single Family Primary Residence.***
The online application will not allow you to enter a range of charges.

Description of Other Fee or Third Party Charge	Charge per Loan

NJ NMLS Entity ID Number: _____

For Use as a Worksheet Only – Do Not Send to the Department!

Appraisal Analysis Section

Appraisal Methods Summary
as of 12/31/2015

Please respond to the following questions based on the methods used to conduct your appraisals **on all loans made to New Jersey consumers** during 2015. Round all amounts to the nearest whole dollar.

1. Which of the following methods were employed in obtaining a real property appraisal for a residential first mortgage loan applicant?

(a) Appraisal performed **internally**? ***YES*** ☐ ***NO*** ☐

Was the borrower charged a fee for this service? ***YES*** ☐ ***NO*** ☐

If the answer is ***YES***, what was the average appraisal fee? ☐

(b) Appraisal by **independent appraiser**? ***YES*** ☐ ***NO*** ☐

Was the borrower charged a fee for this service? ***YES*** ☐ ***NO*** ☐

If the answer is ***YES***, what was the average appraisal fee? ☐

(c) Appraisal by **appraisal management company**? ***YES*** ☐ ***NO*** ☐

Was the borrower charged a fee for this service? ***YES*** ☐ ***NO*** ☐

If the answer is ***YES***, what was the average appraisal fee? ☐

2. If methods (b) or (c) were used, please provide the names and addresses of the two firms most frequently used.

Name of Firm 1:					
Address of Firm 1:					
	City:		**State:**		**ZIP:**
Name of Firm 2:					
Address of Firm 2:					
	City:		**State:**		**ZIP:**

NJ NMLS Entity ID Number: _____

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Surety Bond Policies

Surety Bond Requirement

The surety bond requirement for your business is based on the total dollar amount of all mortgage loans made during 2015 as disclosed in this annual report. The online application will use the figures supplied earlier in the Mortgage Lending Activity Summary, and use the table below to determine the required coverage.

1	Total Dollar Amount of all Mortgage Loans Made during 2015. *(From the total line of the Mortgage Lending Activity Summary.)*	

Use the following table to find your surety bond requirement…

If the Total Amount of Mortgage Loans in line 1 is…				… the required coverage is…
From	$0	*up to*	$50,000,000	$150,000
From	$50,000,001	*up to*	$75,000,000	$200,000
From	$75,000,001	*up to*	$100,000,000	$250,000
From	$100,000,001	*and over*		$300,000

The online application will ask for detailed information concerning each surety bond in effect as of December 31, 2015. The Surety Bond Detailed Information page of this worksheet is provided to assist you in compiling that information.

Once the detailed surety bond information has been entered, the online application will automatically perform the necessary calculations to verify that the requirement has been satisfied. The following chart is provided so you can compare the expected results.

2	Total Amount of Surety Bond Coverage *(Add all amounts of coverage reported on any Surety Bond Detail pages.)*	
3	Required Surety Bond Coverage Amount from the table above *(Based on the entry in line 1.)*	

The Total Amount of Coverage (line 2) must be sufficient to meet your Surety Bond Requirement (line 3).

NOTE: **If your current coverage is deficient, provide original documentation to the Department within 30 days of filing this annual report evidencing that the required coverage has been obtained. Please send this information to the address at the bottom of the cover page.**

Refer to the online application's Help page for a more detailed explanation of this surety bond calculation.

NJ NMLS Entity ID Number: _____

For Use as a Worksheet Only -- Do Not Send to the Department!

Surety Bond Policies

Surety Bond Detail Information

(make additional copies, if needed)

Please enter the Surety Company information for each policy in force as of December 31, 2015, or, if you are no longer actively licensed, at Close of Business.

Name of Provider:					
Business Address:					
	City:		**State:**		**ZIP:**
Policy Number:		**Amount of Coverage:**			
Effective Date:		**Paid Thru or Expire Date:**		☐ **No Expiration Date**	

Name of Provider:					
Business Address:					
	City:		**State:**		**ZIP:**
Policy Number:		**Amount of Coverage:**			
Effective Date:		**Paid Thru or Expire Date:**		☐ **No Expiration Date**	

Name of Provider:					
Business Address:					
	City:		**State:**		**ZIP:**
Policy Number:		**Amount of Coverage:**			
Effective Date:		**Paid Thru or Expire Date:**		☐ **No Expiration Date**	

Name of Provider:					
Business Address:					
	City:		**State:**		**ZIP:**
Policy Number:		**Amount of Coverage:**			
Effective Date:		**Paid Thru or Expire Date:**		☐ **No Expiration Date**	

NJ NMLS Entity ID Number: _____

For Use as a Worksheet Only -- Do Not Send to the Department!

Affidavit

This sample affidavit is included for completeness only. The online application will collect all of the necessary information. DO NOT MAIL THIS AFFIDAVIT to the Department, unless you are specifically instructed to do so.

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I hereby certify that the information provided in connection with this Annual Report is true to the best of my knowledge and belief:

_____ _____
(Date) *(Signature of Licensee or Responsible Party)*

Please enter the following information for the individual preparing this report:

Name of Preparer _____

Title of Preparer _____

Phone of Preparer _____

E-mail of Preparer _____
(if available)

Please enter the following information for the licensee or individual responsible for the licensed entity. The responsible party can be the NJ Qualified Individual or any other officer, and the mailing address should be what is on the Q1 for the company.

Name of Responsible Party _____

Title of Responsible Party _____

Address of Responsible Party _____

Phone of Responsible Party _____

E-mail of Responsible Party _____

Every licensee **must** include their official e-mail address in their annual report according to N.J.A.C. 3:23-4.1. Failure to supply your official e-mail address will result in a failure to comply with the annual report filing.

========== *Notarization* ==========

State of _____ County of _____

Sworn to and subscribed before me this _____ day of _____ in the year _____ , and I hereby certify that I am not an officer or director of this entity.

_____
(Signature of Notary Public)

My commission expires on _____
(Date)