



Application



Application Overview

Member Name:	
Application Contact:	
Contact Phone Number:	
Contact Email Address:	
Application Date:	

Submission Instructions

The following items must be sent to FHLBI for application to the Mortgage Purchase Program (MPP). Include this form as a cover sheet with your application and corresponding files.

	Documentation	Sent
1.	Application	
2.	Servicing Questionnaire (applicable only if retaining the servicing of the loans)	
3.	Quality Control Procedures (including anti-predatory lending and/or responsible lending policy and procedures)	
4.	Organization Chart	
5.	Resumes of Key Personnel	
6.	Certificates of Insurance (for both the Fidelity Bond and Errors & Omissions Policy)	
7.	Data File (if applicable)	

Submit completed application package to:

Mortgage Purchase Program
Federal Home Loan Bank of Indianapolis
8250 Woodfield Crossing Blvd.
Indianapolis, IN 46240
Contact us: 800-274-4636

Applications can also be faxed or emailed:

Attention: MPP
Fax: 317-465-0287
MPP@FHLBI.com



Application



Applicant Information

Institution Name _____

Parent Company _____

Address _____

City _____ State _____ Zip Code _____

Telephone _____ Fax _____

Year Founded _____ Under the laws of (State) _____

HMDA Reporter: Yes No Legal Entity Identifier Number (LEI) _____

Agency Approvals

Agency	ID#	Date Approved	Agency	ID#	Date Approved
FDIC Insured			FHA		
Fannie Mae			VA		
Freddie Mac			Ginnie Mae		

Mortgage Operations Information

Mortgage origination commenced in _____ and mortgage servicing commenced in _____.
(Year) (Year)

Mortgage Operations are currently conducted in _____ location(s) in _____ State(s).
(Number) (Number)

We originate sub-prime loans: Yes No

We purchase Third Party Originations: Yes No

Automated Underwriting Systems used:
 DU LP DO N/A (Manual Underwriting)

Loan Origination Systems used:

Mortgage Origination Statistics (in \$1,000s)

Originations	YTD	Last Year
1-4 Family Originations		
Fixed Rate Mortgages Sold		

We purchased loans from _____ Third Party Originators, of which _____ were affiliates.
(Number) (Number)

We perform pre-purchase & ongoing due diligence on Third Party Originators to determine compliance with all applicable laws. Yes No



Application



Contact Information

Secondary Marketing	Name: _____ Title: _____ Date Employed: _____
	Street Address (if different from main address above): _____
	City, State, Zip Code: _____
	Telephone Number: _____ Fax Number: _____ Email Address: _____
Production	Name: _____ Title: _____ Employed Since (Month & Year): _____
	Street Address (if different from main address above): _____
	City, State, Zip Code: _____
	Telephone Number: _____ Fax Number: _____ Email Address: _____
Underwriting	Name: _____ Title: _____ Employed Since (Month & Year): _____
	Street Address (if different from main address above): _____
	City, State, Zip Code: _____
	Telephone Number: _____ Fax Number: _____ Email Address: _____
Quality Assurance	Name: _____ Title: _____ Employed Since (Month & Year): _____
	Street Address (if different from main address above): _____
	City, State, Zip Code: _____
	Telephone Number: _____ Fax Number: _____ Email Address: _____

Certification of Information

I, the undersigned officer certify that the above information is true and correct.

Signature

Date: _____

Name (print or type)

Title: _____



Servicing Questionnaire



If applying to service loans for FHLBIs Mortgage Purchase Program, complete all portions of this questionnaire to the best of your ability.

Servicing Contact Information

Mortgage Administration	Name: _____ Title: _____ Employed Since (Month & Year): _____
	Street Address (if different from main address): _____
	City, State, Zip Code: _____
	Telephone Number: _____ Fax Number: _____ Email Address: _____
Default Management	Name: _____ Title: _____ Employed Since (Month & Year): _____
	Street Address (if different from main address): _____
	City, State, Zip Code: _____
	Telephone Number: _____ Fax Number: _____ Email Address: _____
REO Servicing	Name: _____ Title: _____ Employed Since (Month & Year): _____
	Street Address (if different from main address): _____
	City, State, Zip Code: _____
	Telephone Number: _____ Fax Number: _____ Email Address: _____
Investment Accounting (Remittance Processing)	Name: _____ Title: _____ Employed Since (Month & Year): _____
	Street Address (if different from main address): _____
	City, State, Zip Code: _____
	Telephone Number: _____ Fax Number: _____ Email Address: _____



Servicing Questionnaire



Mortgage Servicing Statistics (in \$1,000s)

Servicing	As of Last Month End	As of Last Year End
Total Servicing		
Our institution is currently servicing mortgages for the following investors:		

General Questions

How many people do you employ on your Servicing staff? (Include all full-time, collection, foreclosure, and real estate owned staff, as well as support staff including, escrow, and vault/note maintenance personnel).
What type of internal and external training is offered to Servicing staff to ensure staff is familiar with internal, regulatory, and/or investor requirements?
Describe the Servicing Quality Control System:
What Servicing Software do you use?
What Remittance Types do you support for your investors? (Check all that apply) <div style="display: flex; justify-content: space-around; margin-top: 5px;"> Scheduled/Scheduled Scheduled/Actual Actual/Actual </div>

Sub Servicing Relationships

Do you act as a Servicing Agent for other Servicers?	Yes	No
If Yes, do you maintain the original mortgage files?	Yes	No
Do you use any Servicing Agents or Subservicers to service all or any portion of your portfolio?	Yes	No
If Yes, list names of Servicing Agents or Subservicers:		
If Yes, does the Servicing Agent or Subservicer maintain the original mortgage files?	Yes	No
Describe the quality or monitoring system used to ensure that the Servicing Agent is in compliance with your Servicing requirements:		



Servicing Questionnaire



Collections Staff

How many full-time collectors do you employ?		
What is the average number of years of experience for your collectors?		
What is the average number of delinquent accounts assigned to each collector?		
Do your collectors have delinquency goals?	Yes	No
If Yes, describe these goals:		
Explain the process of how collectors are assigned their workloads (for example: 30, 60, 90+ delinquent; alphabetically; per investor; or other).		

Collections Operations for Conventional Mortgages

When and how often do you send late notices (for example: 30, 60, 90+ delinquent)?		
When is personal contact first initiated?		
When do you order inspections?		
Describe the tracking or monitoring system used for following up on promise dates:		
Are partial payments accepted?	Yes	No
If Yes, how are they posted?		
For delinquent mortgages, are repayment plans greater than 3 (three) months put in writing?	Yes	No
In what order are customer payments applied (for example: escrow, interest, principal, or other)?		
Do you have any mortgages with due dates other than the first of the month?	Yes	No
If Yes, what are the other due dates?		
What alternatives to foreclosure, if any do you make available to customers (for example: modification, short sale or other)?		



Servicing Questionnaire



Foreclosures & Bankruptcies

Do you maintain a separate staff for processing foreclosures? If Yes, how many full-time employees are on your foreclosure staff? _____	Yes	No
Do you maintain a separate staff for processing bankruptcies? If Yes, how many full-time employees are on your bankruptcy staff? _____	Yes	No
Describe your monitoring system for tracking foreclosures and bankruptcies:		

Escrows

Describe the type of monitoring system used to identify and pay escrow items before they are due:		
Do you conduct yearly analyses on each account that has an escrow?	Yes	No
Provide a brief description of your Mortgage Insurance (MI) claims procedures:		

Bank Reconciliation

Provide a brief description of how you reconcile custodial accounts:

Delinquency Rates

Provide the current delinquency rates for your Conventional mortgage portfolio by number of loans and UPB. Information as of _____ (last month end)			
	Loan Count	Dollar Amount	Percent of Total
Current			
30 Days Past Due			
60 Days Past Due			
90+ Days Past Due			
Total Conventional Mortgage Portfolio			