



17800 Castleton Street, Suite 488, City of Industry, CA 91748  
 Telephone (626) 964-4040  
[www.pmcmtg.com](http://www.pmcmtg.com)

Forward New Submissions to: [submission@pmcmtg.com](mailto:submission@pmcmtg.com) or E-Fax: (626) 316-7323

### MINIMUM SUBMISSION REQUIREMENTS FOR ALL LOAN TYPES

**Purchase:**

- Wholesale Loan Submission Form
- Wholesale Submission Form Fee Schedule
- Transmittal Summary Form 1008
- Initial 1003 signed & dated by borrower(s) or interviewer
- Purchase Contract or Escrow Instructions
- Income Documentation (VOE form required for VOE Program)
- Initial Good Faith Estimate 2010
- Settlement Service Provider List
- Borrower Authorization to Receive Docs Electronically
- IRS 4506-T form completed & signed by borrower(s)
- Borrower Authorization form signed & dated by borrower(s)

**Refinance:**

- Wholesale Loan Submission Form
- Wholesale Submission Form Fee Schedule
- Transmittal Summary Form 1008
- Initial 1003 signed & dated by borrower(s) or interviewer
- Preliminary Title Report
- Income Documentation (VOE form required for VOE Program)
- Initial Good Faith Estimate 2010
- Settlement Service Provider List
- Borrower Authorization to Receive Docs Electronically
- IRS 4506-T form completed & signed by borrower(s)
- Borrower Authorization form signed & dated by borrower(s)

### WHOLESALE LOAN SUBMISSION FORM

(Please type information)

#### Broker Information

Broker: \_\_\_\_\_ Phone: \_\_\_\_\_ Ext: \_\_\_\_\_  
 Address: \_\_\_\_\_ Fax: \_\_\_\_\_  
 \_\_\_\_\_ E-Mail: \_\_\_\_\_  
 Contact: \_\_\_\_\_ PMC Loan Rep: \_\_\_\_\_

#### Borrower / Property Information

_____	_____ - _____ - _____	_____
Borrower Name (Last, First, MI)	SSN	FICO
_____	_____ - _____ - _____	_____
Co-Borrower Name (Last, First, MI)	SSN	FICO

Subject Property Address \_\_\_\_\_  
 \_\_\_\_\_  
 City, State, Zip Code \_\_\_\_\_ County \_\_\_\_\_  
 Property Type: \_\_\_\_\_ Occupancy Type: \_\_\_\_\_  
 SFR Owner Occupied  
 PUD – Circle One: Attached / Detached 2<sup>nd</sup> Home  
 Low Rise Condo (1-4 Floor/s) Non - Owner Occupied  
 High Rise Condo (5+ Floors)  
 Units - Circle One: 2 / 3 / 4

#### Loan Program Information

Loan Amount (1 <sup>st</sup> TD): \$ _____	LTV: _____	Loan Purpose: Purchase Rate & Term Refinance Cash-Out Refinance
Loan Amount (2 <sup>nd</sup> TD): \$ _____	CLTV: _____	
Sales Price: \$ _____		
Appraisal Value: \$ _____		

CONVENTIONAL  
 Program Code: \_\_\_\_\_  
 Fixed  
 ARM  
 Interest Only

Term:  
 10 Years  
 15 Years  
 20 Years  
 30 Years  
 40 Years

Doc Type:  
 Full  
 VOE



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### Wholesale Submission Form Fee Schedule

Indicate fees charged to ensure an accurate comparison of the settlement charges appearing on your initial **GFE**. PMC BanCorp is not obligated to accept the loan from the broker should the loan term, fees, or other information on the initial GFE is inaccurate / unacceptable.

<b>Broker Fees:</b>		
Loan Origination Fee	\$ _____	} \$
Processing Fee	\$ _____	
Admin Fee	\$ _____	
Application Fee	\$ _____	
<b>PMC BanCorp:</b>		
Underwriting Fee	\$ 998.00	\$ 998.00
(For Texas Properties \$1,198)		
<b>GFE BLOCK 1: OUR ORIGATION CHARGE</b>		\$

<b>Interest Rate Credit / Charge to Borrower (Check 1 box)</b>		
Par Pricing		
Rebate	_____ % = \$ _____ (-)	
Discount point	_____ % = \$ _____ (+)	
<b>GFE BLOCK 2: Your credit / charge for interest rate chosen</b>		\$

<b>GFE A: Your Adjusted Origination Charges</b>	\$
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Broker is aware that GFE BLOCK 1 charges cannot increase at settlement. If there will be any changed circumstances PMC BanCorp will send a revised GFE to the borrowers for re-disclosure.

Broker is aware that any amount listed on the GFE that is out of tolerance at closing will be deducted from brokers rebate / origination charged and credited to the borrower. This includes but are not limited to PMC Re-Draw Fee, Rate Extension Fee which will be deducted from Broker Fee at Funding

**The undersigned certifies that the borrowers listed on this loan submission form:**

- Have been provided with an initial GFE within 3 business days of the application date
- Have confirmed receipt of the initial GFE
- Have expressed verbally to you (Broker), their intention to proceed with the loan covered by the issued GFE
- Were not charged any fee prior to receipt of the GFE, other than a reasonable credit report fee

\_\_\_\_\_  
 Broker Representative Printed Name / Signature

\_\_\_\_\_  
 Date



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## SETTLEMENT SERVICE PROVIDER LIST

We are required to provide you with a written list of Settlement Service Providers at the time we provide the Good Faith Estimate. You are not required to use the settlement service providers listed here. However, you must make your selection known within 10 business days of receiving this list or by the date shown on Line 2 of Important Dates on Page 1 of your Good Faith Estimate. If we do not hear from you by then or you tell us you do not want to shop for these services, we will select the settlement service provide so as not to delay the processing of your loan.

**Borrower's Name :** \_\_\_\_\_

**Property Address :** \_\_\_\_\_

(Required to list at least one (1) Title Company)

▪ **TITLE COMPANY – Block 4 & 5 of your GFE:**

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

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

Phone No & Contact Info : \_\_\_\_\_

(Required to list at least one (1) Escrow Company)

▪ **ESCROW / SETTLEMENT COMPANY – Block 4 of your GFE:**

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

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

Phone No & Contact Info : \_\_\_\_\_

(Optional)

▪ **OTHER REQUIRED SERVICES YOU CAN SHOP FOR – Block 6 (Termite Inspection, etc)  
or List additional Escrow and/or Title companies here, if applicable :**

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

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

Phone No & Contact Info : \_\_\_\_\_

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

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

Phone No & Contact Info : \_\_\_\_\_

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

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

Phone No & Contact Info : \_\_\_\_\_



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## BORROWER'S AUTHORIZATION TO RECEIVE DOCUMENTS ELECTRONICALLY

I, \_\_\_\_\_, hereby give authorization for  
(Borrower Name)

**PMC Bancorp** to send my Mortgage Loan Disclosures and Appraisal Report electronically to my email address at \_\_\_\_\_.

This includes, but is not limited to, the initial Mortgage Loan Disclosures that may be required to process my home loan application.

\_\_\_\_\_  
(Borrower Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Borrower's Printed Name)

**Request for Transcript of Tax Return**

OMB No. 1545-1872

▶ **Do not sign this form unless all applicable lines have been completed.**  
**Read the instructions on page 2.**  
 ▶ **Request may be rejected if the form is incomplete, illegible, or any required line was blank at the time of signature.**

**Tip:** Use Form 4506-T to order a transcript or other return information free of charge. See the product list below. You can also call 1-800-829-1040 to order a transcript. If you need a copy of your return, use **Form 4506**, Request for Copy of Tax Return. There is a fee to get a copy of your return.

<b>1a</b> Name shown on tax return. If a joint return, enter the name shown first.	<b>1b</b> First social security number on tax return or employer identification number (see instructions)
<b>2a</b> If a joint return, enter spouse's name shown on tax return	<b>2b</b> Second social security number if joint tax return

**3** Current name, address (including apt., room, or suite no.), city, state, and ZIP code

**4** Previous address shown on the last return filed if different from line 3

**5** If the transcript or tax information is to be mailed to a third party (such as a mortgage company), enter the third party's name, address, and telephone number. The IRS has no control over what the third party does with the tax information.

**Verification Bureau Inc. 247 SW 8th St. Suite 147 Miami, FL 33130**

**Caution: DO NOT SIGN this form if a third party requires you to complete Form 4506-T, and lines 6 and 9 are blank.**

**6 Transcript requested.** Enter the tax form number here (1040, 1065, 1120, etc.) and check the appropriate box below. Enter only one tax form number per request. ▶ \_\_\_\_\_

**a Return Transcript**, which includes most of the line items of a tax return as filed with the IRS. Transcripts are only available for the following returns: Form 1040 series, Form 1065, Form 1120, Form 1120A, Form 1120H, Form 1120L, and Form 1120S. Return transcripts are available for the current year and returns processed during the prior 3 processing years. Most requests will be processed within 10 business days . . . . .

**b Account Transcript**, which contains information on the financial status of the account, such as payments made on the account, penalty assessments, and adjustments made by you or the IRS after the return was filed. Return information is limited to items such as tax liability and estimated tax payments. Account transcripts are available for most returns. Most requests will be processed within 30 calendar days . . . . .

**c Record of Account**, which is a combination of line item information and later adjustments to the account. Available for current year and 3 prior tax years. Most requests will be processed within 30 calendar days . . . . .

**7 Verification of Nonfiling**, which is proof from the IRS that you **did not** file a return for the year. Most requests will be processed within 10 business days . . . . .

**8 Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript.** The IRS can provide a transcript that includes data from these information returns. State or local information is not included with the Form W-2 information. The IRS may be able to provide this transcript information for up to 10 years. Information for the current year is generally not available until the year after it is filed with the IRS. For example, W-2 information for 2006, filed in 2007, will not be available from the IRS until 2008. If you need W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213. Most requests will be processed within 45 days . . . . .

**Caution:** If you need a copy of Form W-2 or Form 1099, you should first contact the payer. To get a copy of the Form W-2 or Form 1099 filed with your return, you must use Form 4506 and request a copy of your return, which includes all attachments.

**9 Year or period requested.** Enter the ending date of the year or period, using the mm/dd/yyyy format. If you are requesting more than four years or periods, you must attach another Form 4506-T. For requests relating to quarterly tax returns, such as Form 941, you must enter each quarter or tax period separately.

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_      \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_      \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_      \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**Signature of taxpayer(s).** I declare that I am either the taxpayer whose name is shown on line 1a or 2a, or a person authorized to obtain the tax information requested. If the request applies to a joint return, **either** husband or wife must sign. If signed by a corporate officer, partner, guardian, tax matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute Form 4506-T on behalf of the taxpayer.

<b>Sign Here</b>	Signature (see instructions) _____	Date _____	Telephone number of taxpayer on line 1a or 2a (    ) _____
	Title (if line 1a above is a corporation, partnership, estate, or trust) _____		
	Spouse's signature _____	Date _____	