

LENDER PAID COMPENSATION CERTIFICATION

BROKER CONTACT INFORMATION		
BUSINESS NAME	PMC BROKER ID#	PMC A/E
BROKER CONTACT NAME	TITLE	
PHONE	E-MAIL	

Brokers may select a Compensation Level on a Monthly Basis. If no change is received by PMC, the prior period Compensation Level will automatically renew until further changes are requested.

Compensation Level changes are allowed, but must be submitted between the 25th and last day of the month, and will take effect on the first day of the following month. **The Lender Paid compensation will be paid pursuant to the Compensation Certification in effect at time of receipt and acceptance of Borrower application by PMC.**

The initial Compensation Certification Form must be submitted in writing, by submitting this completed form. Subsequent changes to Compensation Levels and Periods may be submitted using this form, or via the PMC BanCorp Website [www.pmcmtg.com].

COMPENSATION PLAN SELECTION	<input checked="" type="checkbox"/> CHECK A BOX
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BASE COMPENSATION LEVEL (CONVENTIONAL)								
LEVEL	% OF LOAN AMOUNT	<input checked="" type="checkbox"/>	LEVEL	% OF LOAN AMOUNT	<input checked="" type="checkbox"/>	LEVEL	% OF LOAN AMOUNT	<input checked="" type="checkbox"/>
A	0.500%		H	1.375%		O	2.250%	
B	0.625%		I	1.500%		P	2.375%	
C	0.750%		J	1.625%		Q	2.500%	
D	0.875%		K	1.750%		R	2.625%	
E	1.000%		L	1.875%		S	2.750%	
F	1.125%		M	2.000%		T	2.875%	
G	1.250%		N	2.125%		U	3.000%	

Please complete the section below by writing in your selected compensation as a total percentage.

BASE COMPENSATION LEVEL:

The authorized signor indicates, by his/her signature, that this Compensation Plan request or Compensation Plan change is approved for the Broker Firm, and further certifies, represents, and warrants that the Submitted Plan and the Brokerage Firm's Individual Loan Originator Employee Compensation Plan are in compliance with the Federal Reserve Board's final rule as published in 12 CFR Part 226 of Regulation Z and Broker and all Licensed Loan Originators are in full compliance with Consumer Paid Transactions and Anti-Steering as also published in 12 CFR Part 226 of Regulation Z.

AUTHORIZED SIGNATURE _____ Date _____

PRINTED NAME _____ TITLE _____

Please e-mail your completed form to brokerdesk@pmcmtg.com or Fax to: 626-316-7320