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## Department of Financial Institutions

### Supplemental Mortgage Banker Application Information

**Purpose:** A completed Supplemental Mortgage Banker Application Information form must be submitted to the Department of Financial Institutions, Division of Banking for consideration of licensure.

**Notice:** This form is required under Chapter 224, Subchapter III of the Wisconsin Statutes for an entity applying for a mortgage banker license. Refusal to provide this information may result in the denial of a license. Failure to complete this application completely and accurately may result in denial or revocation of license, and any other penalties as provided by law. Personally identifiable information on this form may be matched against tax information, outstanding child and family support data, and law enforcement agencies. This document can be made available in alternate formats upon request to qualifying individuals with disabilities.

**Instructions:** Questions 4, 7, 10, and 14 request documentation. These items may be submitted separately or combined with a copy of this completed form in one document.

**Who to Contact:** Contact Mortgage Banking licensing staff by phone at 608-261-7578 or send your questions via email to [DFIMortgageBanking@dfi.wisconsin.gov](mailto:DFIMortgageBanking@dfi.wisconsin.gov) for additional assistance.

#### Company Name:

1. Number of 1- to 4-unit residential mortgage loans serviced or subserviced for others, excluding whole loans owned and loans being interim serviced prior to sale as of the most recent calendar year end in all states, districts, and territories of the United States:

If the above response is fewer than 2,000 loans, responses to items 2 through 14 are not required.

2. Name and title of the members of your company's board of directors or similar body constituted to exercise oversight of the company:
3. Confirm that the board of directors or similar body identified in question 2 is responsible for the following:
  - a. Establishing and maintaining a written corporate governance framework, including appropriate internal controls designed to monitor corporate governance and assess compliance with the corporate governance framework, and making the document available to the Division upon request.      Yes      No

- b. Monitoring and ensuring your company's compliance with the corporate governance framework and the Division's [guidance](#) regarding the Model State Regulatory Prudential Standards for Nonbank Mortgage Servicers.      Yes      No
- c. Accurate and timely regulatory reporting, including the requirements for filing the Mortgage Call Report.      Yes      No
4. Provide a copy of your company's internal audit policy or other document demonstrating internal audit requirements.
5. Confirm that if granted a Wisconsin mortgage banker license, the results of internal audits will be made available to the Division upon request.      Yes      No
6. Confirm that if granted a Wisconsin mortgage banker license, the company's annual external audit will include, at a minimum, the following:
- a. Annual financial statements including a balance sheet, statement of operations [income statement] and cash flows, including notes and supplemental schedules prepared in accordance with generally accepted accounting principles (GAAP).      Yes      No
- b. Assessment of the internal control structure.      Yes      No
- c. Computation of tangible net worth.      Yes      No
- d. Validation of mortgage servicing rights (MSR) valuation and reserve methodology, if applicable.  
Yes      No
- e. Verification of adequate fidelity and errors and omissions (E&O) insurance.      Yes      No
- f. Testing of controls related to risk management activities, including compliance and stress testing, where applicable.      Yes      No
7. Provide copies of the company's policies and procedures to identify, measure, monitor, and mitigate risk.
8. Confirm that the company will conduct a risk management assessment on an annual basis concluding with a formal report to the individuals identified in question 2 and that will be available to the division upon request.      Yes      No
9. The most recent quarter for which a Mortgage Call Report was filed:
- Items 10 through 13 reference the end of the most recent quarter for which a Mortgage Call Report was filed. If a Mortgage Call Report has not yet been filed, provide the requested information as of the most recent quarter-end date, and indicate in item 9 the date as of which the requested information in items 10 through 13 was prepared.
10. Provide an overview of your company's reverse mortgage assets and liabilities as of the end of the most recent quarter for which a Mortgage Call Report was filed. Include the amount of each item along with a brief description (i.e., reverse mortgage loans held for investment, reverse mortgage loans held for sale, reverse mortgage MSRs, and any associated liabilities) and indicate the Mortgage Call Report line item in which each balance is included.

11. List the total unpaid principal balance (UPB) for all loans for which you own the mortgage servicing rights (MSR), as of the end of the most recent quarter for which a Mortgage Call Report was filed. Exclude whole loans owned and interim servicing.

Type	UPB (\$)
Residential First Mortgage Loans	
Closed-End Second Mortgage Loans	
Funded Home Equity Lines of Credit	
Reverse Mortgage Loans	
1-4 Unit Construction and Land Development Loans	

12. List the total UPB for all loans for which you own the MSRs, broken down by the following categories and advancing types, as of the end of the most recent quarter for which a Mortgage Call Report was filed. Exclude reverse mortgages, whole loans owned, and interim servicing.

Type	UPB (\$)
Fannie Mae Scheduled/Scheduled	
Fannie Mae Scheduled/Actual	
Fannie Mae Actual/Actual	
Freddie Mac Scheduled/Scheduled	
Freddie Mac Scheduled/Actual	
Freddie Mac Actual/Actual	
Ginnie Mae	
PLS and Other	

13. Carrying value of pledged assets as of the end of the most recent quarter for which a Mortgage Call Report was filed:

14. Provide copies of plans, policies, and procedures for maintaining operating liquidity sufficient for the ongoing needs of the company.

**AFFIDAVIT**

I, \_\_\_\_\_, the undersigned, am employed by, or am an officer or a  
 \_\_\_\_\_  
 (Print Name)

control person of, \_\_\_\_\_  
 \_\_\_\_\_  
 (Name of Licensee)

I certify that I have reviewed the foregoing responses, have made diligent inquiry as to their accuracy, and they are true and correct to the best of my knowledge.

\_\_\_\_\_  
 (Signature) (Title) (Date)