

fcm

how to Sign Initial Disclosures for Borrower

a Mortgage Boutique is a division of first community mortgage

Emai

 The email borrower will receive from First Community Mortgage



Hello Ken N Customer JR.

Thank you for choosing MLD Mortgage Inc. to assist with your mortgage needs. MLD Mortgage Inc. has partnered with First Community Mortgage, Inc. to complete your home loan closing transaction. We're off to a great start with your mortgage loan application. To proceed to the next step, we require your prompt attention to some time-sensitive paperwork that requires your signature. Kindly

click the link below to review and sign your application documents.

If you have any questions, please contact your Loan Originator: John Tester (949) 294-4581

Click Hen

firstcommunitymortgage@fcmpartners.com

Sign In

• Enter your credintials to sign in

First name		
ken		
Last name		
custtomer		
Last 4 of SSN		
	_	
Need help?		



Consent

 Review and accept the document consent 1st before signing. Once you review the document on the screen, please click Next DOC at the bottom of the page

Having read the Agreement, do signatures?

View Agreement

Consent

Having read the Agreement, do you accept using electronic records and

DECLINE



Review

• You will see a yellow tab next to where signatures are needed on the disclosure package. Click the box with Blue pen to sign the document – Once you click the blue box the document will take you to next place that requires a signature or answer to a questions regarding counseling or language preference. Click next to continue signing.



ONSENT	²³ done =
ted by the Lender: No./Universal Loss Identifies 9500000363 / 5433008382010078029046 Residential Loan Application implete the information on this application. If you are applying for this	0000036982 agency Lase No
Borrower Information. This section asks about your personal	information and your income from employment and other sources, such
a Maestantuleko , Middle, Last, Suffix) atomer - JR ames - List any names by which you are known or any names o credit was previously received (First, Middle, Last, Suffix)	Social Security Number 500 - 50 - 7000 (or Individual Taxpayer Intentification Number) Date of Birth Citizenship (mm/dd/yyy) @U.S. Elitzan (02/04/1955 O Permanent Resident Alien
dit ving for Individual credit. ving for joint credit. Taka Number of Barrowers: rawer intends to apply for joint credit. Your initials:	List Name(s) of Other Borrower(s) Applying for this Loan (First, Middle, Lost, Suffix) - Use a separator between names
us Dependents (not listed by another Borrower) Number 0	Contact Information Home Phone (010) 222-2222 Cell Phone (949) 294-4581 Work Phone Ext. Email Clindy, edmondson@emortgageboutigue.com
255	
5 Birch St	Dot #
uk Sta Counter Address 7 3 Views 7 Marster Manufactor Others	ae CA ZIP 91502-1234 Country US
Address for ISOC about 2 and 2	unora unorante concerne concerne da a raga raga i functional
Address for LESS than 2 years, list Pormer Address IX Does not ap	duh.
iss - it afferent from Currevit Address D. Does nat apply	
Employment/Self-Employment and income	
Business Name National Consulting Phone (8 6 Main St nk State	Bit 332-3332 Gross Monthly Income Base \$ 10,000.00 /month Overtime \$ 1,900.00 /month Rance \$ 250.00 /month
9	

Review

 You will see a yellow tab next to where signatures are needed on the disclosure package. Click the box with Blue pen to sign the document – Once you click the blue box the document will take you to next place that requires a signature or answer to a questions regarding counseling or language preference. Click next to continue signing.



CA Request for Fair Lending Information

are offered by independent third parties to help	the Borrower understand the rights and	
group or web-based classes) within the last 12 r	nonths?	
t/ Attended Workshop in Person	ompleted Web-Based Workshop	-
seling Agency ID #		
approval, provide the name of the Housing Educa	ation Program	
nm/dd/yyyy		-
ed counselor-to-client services) within the last I Pace-to-Face Telephone	12 months?	
eling Agency ID #		
www.hud.gov/program_offices/housing/sfh/hoo pproval, provide name of Housing Counseling A	gency:	
mm/dd/vvvv		
Vietnamese Other:	📃 I do not wish to respon	4
Vietnamese Other: (Tiếng Việt) Your answer does not meán the Lender or Other y let them assist you or direct you to persons with housing counseling agencies approved by th	her Loan Participants agree to communica no can assist you. e U.S. Department of Housing and Ura	
Vietnamese Other: (Tiếng Việt) Your answer does not mean the Lender or Oth y let them assist you or direct you to persons wit housing counseling agencies approved by th of the following Federal government agencies: (800) 569-4287 or https://www.hud.gov/program or www.consumerfinance.gov/find-a-housing-or	L do not wish to respon her Loan Participants agree to communica no can assist you. e U.S. Department of Housing and Ura m_offices/housing/sfh/hcc. counselor.	d ne Next
Vietnamese Other:	Lido not wish to respon her Loan Participants agree to communica to can assist you. e U.S. Department of Housing and Ura <u>m_offices/housing/sfh/hcc.</u> counselor.	d Next
Vietnamese Other:	I do not wish to respon her Loan Participants agree to communication can assist you. e U.S. Department of Housing and Ure m offices/housing/sfh/hcc. counselor. Source can take to meet my mortgage obligations. (6) Authorization for Use and Sharing of Information By song result and there with each other (i) the loan apprication ban information and documentation. (ii) a consumer credit re store, for so lang as they have an interest in my loan or (i) process and underwrite my loan.	d ne Next Next ments made parts to and related part on me, e actions its servicing.
Vietnamese Other:	I do not wish to respondent to the respondent to the second design of the second design o	d re Next Next ments made pants to and related port on mue, rations its servicing: my loan mplication d Other Lean hyss and
Vietnamese Other: (Tiếng Việt) Your answer does not mean the Lender or Otly let them assist you or direct you to persons with the following Federal government agencies: 800) 569-4287 or https://www.hud.gov/program or www.consumerfinance.gov/find-a-housing-course of the following Federal government agencies: 800) 569-4287 or https://www.hud.gov/program or www.consumerfinance.gov/find-a-housing-course of the following federal government agencies: 800) 569-4287 or https://www.hud.gov/program or www.consumerfinance.gov/find-a-housing-course of the following federal file claim of the following federal file claim of the following federal government agencies: 800) 569-4287 or https://www.hud.gov/program or www.consumerfinance.gov/find-a-housing-course of the following federal file claim of the following federal file	I do not wish to respondent to communication of the loss of th	te Next Next Next Next Next Next Next Ne
Vietnamese Other:	I do not wish to respon I do I	d ne Next Next Next Next Next Next Next Next Next Next Next

Questions

• You will need to answer questions regarding race, sex, and martial status



Initial Here		
sian/Pacific Islanders	Black	
/hite lale	Other - specify:	 lext
nmarried (include single; vorced, widowed)	Separated	
WLEDGMENT OF RE	CEIPT	
CE.		

E-Sign

• On the transcript page you will need to check box and then e-sign.

Signature requested sign the re of party of signature	e of taxpayer(s). I declare that I am either the taxpayer whose name is shown on line 1a of I if the request applies to a joint neturn, at least one spouse must sign; however, if both sp equest. If signed by a corporate officer. 1 percent or more shareholder, partner, managing ther than the taxpayer. I certify that I have the authority to execute Form 4506-C on behalt date.	r, if applicable, line 2a, ouses' names and TINs member, guardian, tax of the taxpayer. Note:	or a person authorized to obtain the tax information are listed in lines 1a-1b and 2a-2b, both spouses must matters partner, executor, receiver, administrator, trustee, This form must be received by IRS within 120 days of the	
Signa	atory attests that he/she has read the above attestation clause and upon so reading de	clares that he/she has	the authority to sign the Form 4506-C. See instructions	
>	Signature for Line 1a (see instructions)	Date	Phone number of taxpayer on line 1a or 2a (818) 222-2222	Sign
~	Form 4506-C was signed by an Authonized Representative	Signatory co	nlimes document was electronically signed	-
	Print/Type name Ken N Customer JR	1		
Sign Here	Title (if line 1a above is a corporation, padmership, estate, or trust)			
	Spouse's signature (required if leated on Line 2a)		Daig	
	Form 4506-C was signed by an Authorized Representative	Signatory co	firms document was electronically signed	
	Print/Type name			
atalog N	I Number 72627P www.irs.gov		Form 4506-C (Rev. 10-2022)	

SSN

On the Social Security
 Number Form the borrower
 will need to add 90 days
 and initial

A	To Releas	se Social
Printed Name:		
Reason for authorizin	a consent: (Plea	se select one
N To pock for a	modeana	JTo
To apply tor a	hongage	110
To poply for a	cradit card	(To
With the following co	mpany ("the Con	npany"):
Company Name:	First Commu	mity Morte
Company Address:	262 Robert	Rose Drive
The name and addre	ss of the Compa	ny's Agent (if
Agent's Name:	PGB Solutio	ons, Inc.
Agent's Address:	1633 Baysho	re Hwy, St
I authorize the Socia applicable, for the pu guardian of a minor, information containe information from Soci	al Security Admi rpose I identified or the legal guard d herein is true a ial Security record	nistration to I am the ind fian of a legal and correct. I ds, I could be
This consent is va indicated otherwise	lid only for one by the individua	e-time use. al named ab
This consent is vali	d for 🛄 days	from the dat
Signature:	l sun	07
Relationship (if not th	e individual to wi	hom the SSN
	Contraction of the second s	

Security Number (SSN) Vermication

	Date of Birth: 07/04/1966	Social Security Number: 500-50-7000		
1				
apply	for a loan	L. To meet a licensing requirement		
apply f open a apply f rage, , Murf applica ite 3 verify n vidual y incor acknow found g This co ove. If y	a retirement account	□ Other		
apply	Date of Birth: 07/04/1966 ply for a loan en a retirement account ply for a job e, Inc. urfreesboro, TN 37129 blicable): e 340 Burlingame, CA ify my name and SSN to th ual to whom the Social Secu- nompetent adult. I declare a competent adult. I declare a throwledge that if I make any ind guilty of a misdemeanor is s consent is valid only fil- . If you wish to change this igned. (Please			
nagé,	Inc.			
, Mur	freesboro, TN 37129	A		
applic	able):			
ite	340 Burlingame, CA	94010		
verify vidua ly inco ackno found	my name and SSN to the I to whom the Social Secu competent adult. I declare a owledge that if I make any I guilty of a misdemeanor a	e Company and/or the Company's Agent, if rity number was issued or the parent or legal nd affirm under the penalty of perjury that the representation that I know is false to obtain and fined up to \$5,000:		
This ove. If	consent is valid only fo you wish to change this	or <u>90</u> days from the date signed, unless timeframe, fill in the following:	_	
e sigi	ned (Please	initial.)	Pill Pill	in
6		Date Signed:		
was i	ssued):	+		

nt Collection and Use of Personal Information

Submit

 Once completed please click Submit at the bottom of the page

CONSENT	REVIEW
	Your He
Date: 12	/09/2024
Loan nur Lender:	nber: 460000369
Firs 262 Borrowe Ken	st Community Mortgag Robert Rose Drive, n(s): N Customer JR
I/We her	eby acknowledge the receipt
Ken	N Customer JR
- BORR	OWER - Ken N Custo
	<u>^</u>



DONE

=

SUBMIT

Home Loan Toolkit Acknowledgment

gage, Inc., NMLSID 1019 Murfreesboro, TN 37129

ipt of "Your Home Loan Toolkit" brochure.

12/11/2024 stomer JR - DATE -



Print or Save

 Once the disclosures are submitted you have the option to print or save a copy of the document and sign out of the system.

/	
Save y	
e accessible until 5:28 PM (PS	These ar
DOCUMENT NAME	۵
1003 Uniform Residential Loan Applic	2
1103 Supplemental Consumer Informa	2
Loan Estimate (Ken N Customer JR)	2
Acknowledgment of Receipt of Loan B	12
Written List of Providers	5
Notice of Intent to Proceed with Loan	2
CA Fair Lending Notice (First Commu	2
CA Request for Fair Lending Informati	
CA Notice of Right to Receive Copy of	
First Lien Appraisal Waiver-Receipt Fo	5







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