

**SOUTHERN BANCSHARES, INC.**  
**WAREHOUSE PURCHASE/RESALE APPLICATION**

**1. MORTGAGE COMPANY**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_  
Zip Code: \_\_\_\_\_  
Fax Contact Person: \_\_\_\_\_  
Number of Branch Offices: \_\_\_\_\_  
Location of Branch Offices: \_\_\_\_\_  
States Licensed to Do Business In: \_\_\_\_\_  
President: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

**2. TYPE OF BUSINESS**

Corporation: \_\_\_\_\_ State: \_\_\_\_\_  
Partnership: \_\_\_\_\_ Date Founded: \_\_\_\_\_  
Sole Partnership: \_\_\_\_\_ Parent Co. Name: \_\_\_\_\_  
Please provide a copy of Articles of Incorporation, Corporate Resolution and By-Laws.

**3. TAX IDENTIFICATION #: \_\_\_\_\_**

**4. OFFICERS OF COMPANY AND ORGANIZATIONAL CHART**

Name/Title: \_\_\_\_\_  
Name/Title: \_\_\_\_\_  
Name/Title: \_\_\_\_\_  
(Please fill out the enclosed personal background information sheet and release form on each individual listed)

**5. PRINCIPAL OWNERS OF THE COMPANY**

Name/Title/% Ownership: \_\_\_\_\_  
Name/Title/% Ownership: \_\_\_\_\_  
Name/Title/% Ownership: \_\_\_\_\_  
(Please provide a current resume on each person listed and Personal Background Information and Release Form on each person listed.)

**6. COMPANY APPROVALS**

<u>AGENCY</u>	<u>I.D. NUMBER</u>	<u>DATE APPROVED</u>
FHA	_____	_____
DIRECTOR ENDORSEMENT	_____	_____
VA	_____	_____
VA AUTOMATIC	_____	_____
FNMA	_____	_____
FHLMC	_____	_____

(Please attach a copy of each of the approvals.)

**7.** Has your company ever been suspended from selling loans to any investor?

YES: \_\_\_\_\_ NO: \_\_\_\_\_

If yes, give details: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**8.** Are there any unsatisfied judgments or contingent liabilities against owners or company? YES: \_\_\_\_\_ NO: \_\_\_\_\_

If yes, give details: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**9.** Has your company or any individual of your company ever been suspended by any agency listed in #6 above? YES: \_\_\_\_\_ NO: \_\_\_\_\_

If yes, give details: \_\_\_\_\_  
\_\_\_\_\_

**10.** Do any owners or company have any direct or indirect interest and/or ownership in any title company, Escrow Company, closing office, QC process or other related activities associated with the closing of loans? YES: \_\_\_\_\_ NO: \_\_\_\_\_

If yes, give details: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**11. INVESTOR REFERENCES:**

Please provide information below on the investors that you have sold loans to in the last 6 months.

A) Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Contact Person: \_\_\_\_\_  
E-mail: \_\_\_\_\_

B) Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Contact Person: \_\_\_\_\_  
E-mail: \_\_\_\_\_

C) Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_ Contact Person: \_\_\_\_\_  
 E-mail: \_\_\_\_\_

(If approved by additional investors, please enclose a separate sheet with this application containing the above information on each investor)

**12. CONTACT INFORMATION:**

Position	Name	Telephone	E-mail Address
Primary Contact	_____	_____	_____
Secondary Marketing	_____	_____	_____
Operations Manager	_____	_____	_____
Funding Manager	_____	_____	_____
Underwriting	_____	_____	_____
Finance/Accounting	_____	_____	_____
Servicing	_____	_____	_____
Shipping	_____	_____	_____

**13. EXISTING WAREHOUSE LENDERS:**

Lender: \_\_\_\_\_  
 Contact Person: \_\_\_\_\_  
 E-mail Address: \_\_\_\_\_  
 Telephone/Fax: \_\_\_\_\_  
 Relationship Beginning Date: \_\_\_\_\_  
 Size of Line: \_\_\_\_\_  
 Current Outstanding: \_\_\_\_\_  
 Active: YES: \_\_\_\_\_ NO: \_\_\_\_\_

**14. PREVIOUS WAREHOUSE LENDERS:**

Lender: \_\_\_\_\_  
 Contact Person: \_\_\_\_\_  
 E-mail Address: \_\_\_\_\_  
 Telephone/Fax: \_\_\_\_\_  
 Relationship Beginning Date: \_\_\_\_\_  
 Size of Line: \_\_\_\_\_  
 Current Outstanding: \_\_\_\_\_  
 Active: YES: \_\_\_\_\_ NO: \_\_\_\_\_

**15. Are there any other Warehouse Line Applications pending?**

YES: \_\_\_\_\_ NO: \_\_\_\_\_  
 If yes, give details: \_\_\_\_\_  
 \_\_\_\_\_

- 16. BUSINESS FINANCIAL: (minimal net worth \$100,000.00)**
- (a) Please attach to this application, a copy of your last two audited financial statements, as well as a copy of the most recent unaudited financial statement.
  - (b) Tax returns for the last 2 years
  - (c) Cash flow and loan volume projections for the next 12 months

- 17. FIDELITY BOND AND ERRORS AND OMISSIONS INSURANCE COVERAGE:**  
**(minimal bond requirements of an aggregate \$300,000 with our institution as loss payee in the event of a loss involving the bank's interest and rights to file a claim.)**

	<u>NAME OF INS. CO.</u>	<u>EXP. DATE</u>	<u>AMT. OF COVERAGE</u>
FIDELITY BOND:	_____	_____	_____
E & O INS.:	_____	_____	_____

(Please attach a copy of each policy.)

- 18. HISTORICAL VOLUMES:**  
Please provide the following information for closed loans during the last 12 months:

<u>TYPE</u>	<u>NUMBER OF LOANS</u>	<u>AMOUNT</u>
FHA	_____	_____
VA	_____	_____
CONV	_____	_____
TOTAL	_____	_____

- 19. RETAIL/WHOLESALE LENDING:**  
Please provide a listing of the volumes of both wholesale and retail loans closed during the last 12 months.

<u>TYPE</u>	<u>NUMBER OF LOANS</u>	<u>AMOUNT</u>
RETAIL	_____	_____
WHOLESALE	_____	_____
TOTAL	_____	_____

- 20. QUALITY CONTROL REPORTS:**  
Please provide a copy of your internal quality control procedures and a copy of your last two quality control reports submitted to management.

- 21.** Has your company or any officer representing your company been sued or is your company a party to any lawsuit against or involving the company that would have a material adverse effect on the company's operations or financial condition?

- 22.** Please furnish a copy of your default and claim rate as recorded in HUD's mortgage portfolio analysis system (MPAS) if your company is an approved direct endorsement lender.
- 23. RESUMES**  
Please provide a resume on each principal, all officers of the company as well as DE underwriters. Also provide a background information sheet on each principal and officer.
- 24. APPLICATION FEE**  
Please enclose a \$1,000.00 non-refundable application fee along with this application.

I affirm that all answers and information submitted in this application are true and correct. I hereby authorize Southern BancShares, Inc., at its discretion, to verify and obtain information on company and principal(s) with any other sources including the Texas Department of Savings and Mortgage Lending, and I hereby waive any cause of action or claim I may have against such source with respect to any information they may provide

By: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Date Signed: \_\_\_\_\_

**When application is complete, please mail all information to one of the individuals listed below:**

Billy Fleming  
Texas Star Bank, SSB  
President/CEO  
101 Gassaway  
P O Box 368  
Lott, TX 76656  
254-584-3171 Phone  
bfleming@texas-star-bank.com

Kevin Knesek  
Lone Star Bank, SSB  
Vice-President  
100 S. Main Street  
Drawer A  
Moulton, TX 77975  
361-596-4611 Phone  
kevin@lonestarbanc.com

Norman E. Koch  
First Star Bank, SSB  
President/CEO  
09 S. Commerce Street  
P O Box 7  
Bremond, TX 76629  
254-746-7031 Phone  
nkoch@fsbbremond.net

# PERSONAL/CORPORATE BACKGROUND INFORMATION

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MORTGAGE COMPANY NAME

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OFFICER/PRINCIPAL'S FULL NAME

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RESIDENCE ADDRESS

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DATE OF BIRTH

---

PLACE OF BIRTH (CITY AND STATE)

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SOCIAL SECURITY NUMBER

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DRIVERS LICENSE NUMBER/STATE ISSUED

THE UNDERSIGNED REPRESENTS THAT THE ABOVE INFORMATION IS TRUE AND CORRECT AND HEREBY AUTHORIZES VERIFICATION OF SAID INFORMATION. MORTGAGE COMPANY HEREBY AUTHORIZES SOUTHERN BANCSHARES, INC. AND ITS' AFFILIATED BANKS OR BANK'S AGENT, TO OBTAIN A COPY OF MORTGAGE COMPANY OR PRINCIPAL'S CREDIT REPORT AND OBTAIN OTHER INFORMATION RELATED TO THE ABOVE MORTGAGE COMPANY AND ABOVE PRINCIPALS AS BANK DEEMS NECESSARY.

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SIGNATURE

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DATE

**FP RESOURCES**  
**RELEASE FORM**

In connection with my application for warehouse purchase/resell application, I understand that consumer reports or investigative consumer reports which may contain public record information may be requested or made on me including consumer credit, criminal records, driving record, education, prior employer verification, workers compensation claims and others. These reports will include experience along with reasons for termination of past employment. Further, I understand that you will be requesting information from various Federal, State, local and other agencies, which contain my past activities.

I hereby authorize without reservation, any party or agency contacted by this employer to furnish the above-mentioned information.

I have the right to make a request of FP Resources/Financial Professionals, upon proper identification and the payment of any authorized fees, for the information in its files on me at the time of my request.

I further authorize ongoing procurement of the above-mentioned reports at any time during our relationship, if approved.

I hereby consent to your obtaining the information from FP Resources or any of their licensed agents. I understand to aid in the proper identification of my file or records, the following information, as well as other information is necessary.

Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Street  
Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

County \_\_\_\_\_

Drivers License number \_\_\_\_\_ State \_\_\_\_\_

Social Security Number \_\_\_\_\_

**FOR IDENTIFICATION PURPOSES**

Date of Birth \_\_\_\_\_ Race \_\_\_\_\_ Gender \_\_\_\_\_

Former Names \_\_\_\_\_

Professional License: State \_\_\_\_\_ Type \_\_\_\_\_ Number \_\_\_\_\_

University/College \_\_\_\_\_ Campus \_\_\_\_\_

City/State \_\_\_\_\_ Type of Degree \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**PLEASE LIST FORMER ADDRESSES THAT YOU HAVE LIVED OR WORKED WITHIN THE PAST 5 YEARS ON A SEPARATE SHEET OF PAPER.**