

Uniform Residential Loan Application

This application is designed to be completed by the applicant(s) with the Lender's assistance. Applicants should complete this form as "Borrower" or "Co-Borrower", as applicable. Co-Borrower information must also be provided (and the appropriate box checked) when ☐ the income or assets of a person other than the "Borrower" (including the Borrower's spouse) will be used as a basis for loan qualification or ☐ the income or assets of the Borrower's spouse or other person who has community property rights pursuant to state law will not be used as a basis for loan qualification, but his or her liabilities must be considered because the spouse or other person has community property rights pursuant to applicable law and Borrower resides in a community property state, the security property is located in a community property state, or the Borrower is relying on other property located in a community property state as a basis for repayment of the loan.

If this is an application for joint credit, Borrower and Co-Borrower each agree that we intend to apply for joint credit (sign below):

Borrower		Co-Borrower	
II. TYPE OF MORTGAGE AND TERMS OF LOAN			
Mortgage Applied for: <input type="checkbox"/> VA <input checked="" type="checkbox"/> Conventional <input type="checkbox"/> Other (explain): <input type="checkbox"/> FHA <input type="checkbox"/> USDA/Rural Housing Service		Agency Case Number _____ Lender Case Number _____	
Amount \$ 360,000	Interest Rate 6.875 %	No. of Months 360/360	Amortization Type: <input checked="" type="checkbox"/> Fixed Rate <input type="checkbox"/> Other (explain): <input type="checkbox"/> GPM <input type="checkbox"/> ARM (type):
III. PROPERTY INFORMATION AND PURPOSE OF LOAN			
Subject Property Address (street, city, state, & ZIP) Quincy, MA 02169 County: Norfolk			No. of Units 2
Legal Description of Subject Property (attach description if necessary) See attached hereto			Year Built 1935
Purpose of Loan <input checked="" type="checkbox"/> Purchase <input type="checkbox"/> Construction <input type="checkbox"/> Other (explain): <input type="checkbox"/> Refinance <input type="checkbox"/> Construction-Permanent		Property will be: <input checked="" type="checkbox"/> Primary Residence <input type="checkbox"/> Secondary Residence <input type="checkbox"/> Investment	
Complete this line if construction or construction-permanent loan.			
Year Lot Acquired	Original Cost	Amount Existing Liens	(a) Present Value of Lot \$
	\$	\$	(b) Cost of Improvements \$
			Total (a+b) \$
Complete this line if this is a refinance loan.			
Year Acquired	Original Cost	Amount Existing Liens	Purpose of Refinance \$
	\$	\$	Describe Improvements <input type="checkbox"/> made <input type="checkbox"/> to be made Cost: \$
Title will be held in what Name(s) See attached hereto		Manner in which Title will be held Tenants by the entirety	
Source of Down Payment, Settlement Charges and/or Subordinate Financing (explain) Equity from Subject Property		Estate will be held in: <input checked="" type="checkbox"/> Fee Simple <input type="checkbox"/> Leasehold (show expiration date)	
III. BORROWER INFORMATION			
Borrower's Name (include Jr. or Sr. if applicable)		Co-Borrower's Name (include Jr. or Sr. if applicable)	
Social Security Number		Social Security Number	
Home Phone (incl. area code)		DOB (mm/dd/yyyy)	
Yrs. School		Yrs. School	
<input checked="" type="checkbox"/> Married <input type="checkbox"/> Unmarried (include single, divorced, widowed)		<input type="checkbox"/> Married <input type="checkbox"/> Unmarried (include single, divorced, widowed)	
Dependents (not listed by Co-Borrower) no. 0 ages		Dependents (not listed by Borrower) no. ages	
Present Address (street, city, state, ZIP) Quincy, MA 02169		Present Address (street, city, state, ZIP)	
Mailing Address, if different from Present Address		Mailing Address, if different from Present Address	
If residing at present address for less than two years, complete the following:			
Former Address (street, city, state, ZIP) <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ No. Yrs.		Former Address (street, city, state, ZIP) <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ No. Yrs.	
Former Address (street, city, state, ZIP) <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ No. Yrs.		Former Address (street, city, state, ZIP) <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ No. Yrs.	

Borrower		IV. EMPLOYMENT INFORMATION		Co-Borrower	
Name & Address of Employer	<input type="checkbox"/> Self Employed	Yrs. on this job 14 5MO. Yrs. employed in this line of work/profession 10	Name & Address of Employer	<input type="checkbox"/> Self Employed	Yrs. on this job Yrs. employed in this line of work/profession
Quincy, MA 02169					
Position/Title/Type of Business	Business Phone (incl. area code)		Position/Title/Type of Business	Business Phone (incl. area code)	
Nurse					

If employed in current position for less than two years or if currently employed in more than one position, complete the following:

Name & Address of Employer	<input type="checkbox"/> Self Employed	Dates (from-to)	Name & Address of Employer	<input type="checkbox"/> Self Employed	Dates (from-to)
		Monthly Income \$			Monthly Income \$
Position/Title/Type of Business	Business Phone (incl. area code)		Position/Title/Type of Business	Business Phone (incl. area code)	
Name & Address of Employer	<input type="checkbox"/> Self Employed	Dates (from-to)	Name & Address of Employer	<input type="checkbox"/> Self Employed	Dates (from-to)
		2/26/1996 - 6/3/2005 Monthly Income \$			Monthly Income \$
Position/Title/Type of Business	Business Phone (incl. area code)		Position/Title/Type of Business	Business Phone (incl. area code)	
Birmingham, AL 35243					
Name & Address of Employer	<input type="checkbox"/> Self Employed	Dates (from-to)	Name & Address of Employer	<input type="checkbox"/> Self Employed	Dates (from-to)
		Monthly Income \$			Monthly Income \$
Position/Title/Type of Business	Business Phone (incl. area code)		Position/Title/Type of Business	Business Phone (incl. area code)	
Nurse					
Name & Address of Employer	<input type="checkbox"/> Self Employed	Dates (from-to)	Name & Address of Employer	<input type="checkbox"/> Self Employed	Dates (from-to)
		Monthly Income \$			Monthly Income \$
Position/Title/Type of Business	Business Phone (incl. area code)		Position/Title/Type of Business	Business Phone (incl. area code)	
Name & Address of Employer	<input type="checkbox"/> Self Employed	Dates (from-to)	Name & Address of Employer	<input type="checkbox"/> Self Employed	Dates (from-to)
		Monthly Income \$			Monthly Income \$
Position/Title/Type of Business	Business Phone (incl. area code)		Position/Title/Type of Business	Business Phone (incl. area code)	

V. MONTHLY INCOME AND COMBINED HOUSING EXPENSE INFORMATION						
Gross Monthly Income	Borrower	Co-Borrower	Total	Combined Monthly Housing Expense	Present	Proposed
Base Empl. Income*	\$ 6,600.00	\$	\$ 6,600.00	Rent	\$	
Overtime				First Mortgage (P&I)	2,250.00	\$ 2,364.94
				Other Financing (P&I)		342.03
				Hazard Insurance	99.17	99.17
				Real Estate Taxes	346.87	346.87
				Mortgage Insurance		
				Homeowner Assn. Dues		
Other (before completing, see the notice in "describe other income," below)				Other:		
Total	\$ 6,600.00	\$	\$ 6,600.00	Total	\$ 2,696.04	\$ 3,153.01

* Self Employed Borrower(s) may be required to provide additional documentation such as tax returns and financial statements.

Describe Other Income **Notice:** Alimony, child support, or separate maintenance income need not be revealed if the Borrower (B) or Co-Borrower (C) does not choose to have it considered for repaying this loan.

B/C	Monthly Amount
	\$

VI ASSETS AND LIABILITIES

This Statement and any applicable supporting schedules may be completed jointly by both married and unmarried Co-borrowers if their assets and liabilities are sufficiently joined so that the Statement can be meaningfully and fairly presented on a combined basis; otherwise, separate Statements and Schedules are required. If the Co-Borrower section was completed about a non-applicant spouse or other person, this Statement and supporting schedules must be completed by that spouse or other person also.

Completed ☒ Jointly ☐ Not Jointly

ASSETS		LIABILITIES and Pledged Assets. List the creditor's name, address and account number for all outstanding debts, including automobile loans, revolving charge accounts, real estate loans, alimony, child support, stock pledges, etc. Use continuation sheet, if necessary. Indicate by (*) those liabilities which will be satisfied upon sale of real estate owned or upon refinancing of the subject property.		
Description	Cash or Market Value	LIABILITIES	Monthly Payment & Months Left to Pay	Unpaid Balance
Cash deposit toward purchase held by:	\$			
List checking and savings accounts below				
Name and address of Bank, S&L, or Credit Union		Name and address of Company	\$ Payment/Months	\$
Quincy Credit Union		OPTION ONE MORTGAGE CO 3 ADA WAY IRVINE, CA 92618		
Acct. no.	\$ 6,000	Acct. no.	* (2,966)	352,732
Name and address of Bank, S&L, or Credit Union		Name and address of Company	\$ Payment/Months	\$
		TD BANKNORTH MASS 32 CHESTNUT STREET REGION 178 LEWISTON, ME 04240		
Acct. no.	\$	Acct. no.	* 369	18,248
Name and address of Bank, S&L, or Credit Union		Name and address of Company	\$ Payment/Months	\$
		SALLIE MAE 3RD PTY LSC 1002 ARTHUR DRIVE PO# SMI-0000013421 LYNN HAVEN, FL 32444		
Acct. no.	\$	Acct. no.	* 77	10,069
Stocks & Bonds (Company name/number description)	\$	Name and address of Company	\$ Payment/Months	\$
		DELL FINANCIAL SVCS/CI 12234 N IH 35 SB,BLDG B AUSTIN, TX 78753		
Acct. no.	\$	Acct. no.	* 34	682
Life insurance net cash value	\$	Name and address of Company	\$ Payment/Months	\$
Face amount: \$				
Subtotal Liquid Assets	\$ 6,000	Acct. no.		
Real estate owned (enter market value from schedule of real estate owned)	\$ 490,000	Name and address of Company	\$ Payment/Months	\$
Vested interest in retirement fund	\$			
Net worth of business(es) owned (attach financial statement)	\$	Acct. no.		
Automobiles owned (make and year)	\$	Alimony/Child Support/Separate Maintenance Payments Owed to:	\$	
Other Assets (Itemize)	\$	Job-Related Expense (child care, union dues, etc.)	\$	
		Total Monthly Payments	\$	
Total Assets a.	\$ 496,000	Net Worth (a minus b)	\$ 114,269	Total Liabilities b. \$ 381,731

Schedule of Real Estate Owned (if additional properties are owned, use continuation sheet)

Property Address (enter S if sold, PS if pending sale or R if rental being held for income)	Type of Property	Present Market Value	Amount of Mortgages & Liens	Gross Rental Income	Mortgage Payments	Insurance, Maintenance, Taxes & Misc.	Net Rental Income
Quincy, MA 02169	2 family	\$ 490,000	\$ 352,732	\$	\$ 2,966	\$ 446	\$
	Totals	\$ 490,000	\$ 352,732	\$	\$ 2,966	\$ 446	\$

List any additional names under which credit has previously been received and indicate appropriate creditor name(s) and account number(s):

Alternate Name

Creditor Name

Account Number

VII. DETAILS OF TRANSACTION		VIII. DECLARATIONS				
a. Purchase price	\$	If you answer "Yes" to any questions a through l, please use continuation sheet for explanation.	Borrower	Co-Borrower		
			Yes	No		
			<input type="checkbox"/>	<input checked="" type="checkbox"/>		
	384,456.16		<input checked="" type="checkbox"/>	<input type="checkbox"/>		
	2,610.83		<input type="checkbox"/>	<input checked="" type="checkbox"/>		
	11,285.00					
l. Total costs (add items a through h)	398,351.99	d. Are you a party to a lawsuit?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Subordinate financing	45,000.00	e. Have you directly or indirectly been obligated on any loan which resulted in foreclosure, transfer of title in lieu of foreclosure, or judgment?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Borrower's closing costs paid by Seller		(This would include such loans as home mortgage loans, SBA loans, home improvement loans, educational loans, manufactured (mobile) home loans, any mortgage, financial obligation, bond, or loan guarantee. If "Yes," provide details, including date, name and address of Lender, FHA or VA case number, if any, and reasons for the action.)				
l. Other Credits (explain)		f. Are you presently delinquent or in default on any Federal debt or any other loan, mortgage, financial obligation, bond, or loan guarantee? If "Yes," give details as described in the preceding question.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		g. Are you obligated to pay alimony, child support, or separate maintenance?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		h. Is any part of the down payment borrowed?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		i. Are you a co-maker or endorser on a note?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
New 2nd Mtg Closing Costs	-428.91	j. Are you a U. S. citizen?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. Loan amount (exclude PMI, MIP, Funding Fee financed)	360,000.00	k. Are you a permanent resident alien?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n. PMI, MIP, Funding Fee financed		l. Do you intend to occupy the property as your primary residence? If "Yes," complete question m below.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
o. Loan amount (add m & n)	360,000.00	m. Have you had an ownership interest in a property in the last three years?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
p. Cash from/to Borrower (subtract j, k, l & o from i)	-6,219.10	(1) What type of property did you own-principal residence (PR), second home (SH), or investment property (IP)?			PR	
		(2) How did you hold title to the home-solely by yourself (S), jointly with your spouse (SP), or jointly with another person (O)?			SP	

IX. ACKNOWLEDGEMENT AND AGREEMENT

Each of the undersigned specifically represents to Lender and to Lender's actual or potential agents, brokers, processors, attorneys, insurers, servicers, successors and assigns and agrees and acknowledges that: (1) the information provided in this application is true and correct as of the date set forth opposite my signature and that any intentional or negligent misrepresentation of this information contained in this application may result in civil liability, including monetary damages, to any person who may suffer any loss due to reliance upon any misrepresentation that I have made on this application, and/or in criminal penalties including, but not limited to, fine or imprisonment or both under the provisions of Title 18, United States Code, Sec. 1001, et seq.; (2) the loan requested pursuant to this application (the "Loan") will be secured by a mortgage or deed of trust on the property described in this application; (3) the property will not be used for any illegal or prohibited purpose or use; (4) all statements made in this application are made for the purpose of obtaining a residential mortgage loan; (5) the property will be occupied as indicated in this application; (6) the Lender, its servicers, successors or assigns may retain the original and/or an electronic record of this application, whether or not the Loan is approved; (7) the Lender and its agents, brokers, insurers, servicers, successors and assigns may continuously rely on the information contained in the application, and I am obligated to amend and/or supplement the information provided in this application if any of the material facts that I have represented herein should change prior to closing of the Loan; (8) in the event that my payments on the Loan become delinquent, the Lender, its servicers, successors or assigns may, in addition to any other rights and remedies that it may have relating to such delinquency, report my name and account information to one or more consumer reporting agencies; (9) ownership of the Loan and/or administration of the Loan account may be transferred with such notice as may be required by law; (10) neither Lender nor its agents, brokers, insurers, servicers, successors or assigns has made any representation or warranty, express or implied, to me regarding the property or the condition or value of the property; and (11) my transmission of this application as an "electronic record" containing my "electronic signature," as those terms are defined in applicable federal and/or state laws (excluding audio and video recordings), or my facsimile transmission of this application containing a facsimile of my signature, shall be as effective, enforceable and valid as if a paper version of this application were delivered containing my original written signature.

Acknowledgement. Each of the undersigned hereby acknowledges that any owner of the Loan, its servicers, successors and assigns, may verify or reverify any information contained in this application or obtain any information or data relating to the Loan, for any legitimate purpose through any source, including a source named in this application or a consumer reporting agency.

Borrower's Signature: [Signature] Date: 11/21/05 Co-Borrower's Signature: X Date:

X. INFORMATION FOR GOVERNMENT MONITORING PURPOSES

The following information is requested by the Federal Government for certain types of loans related to a dwelling in order to monitor the lender's compliance with equal credit opportunity, fair housing and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. The law provides that a Lender may not discriminate either on the basis of this information, or on whether you choose to furnish it. If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation. If you do not furnish ethnicity, race, or sex, under Federal regulations, this lender is required to note the information on the basis of visual observation and surname if you have made this application in person. If you do not wish to furnish the information, please check the box below. (Lender must review the above material to assure that the disclosures satisfy all requirements to which the lender is subject under applicable state law for the particular type of loan applied for.)

Borrower <input type="checkbox"/> I do not wish to furnish this information		Co-Borrower <input type="checkbox"/> I do not wish to furnish this information	
Ethnicity: <input type="checkbox"/> Hispanic or Latino <input checked="" type="checkbox"/> Not Hispanic or Latino	Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino		
Race: <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input checked="" type="checkbox"/> White	Race: <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White		
Sex: <input checked="" type="checkbox"/> Female <input type="checkbox"/> Male	Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male		
To be Completed by Interviewer This application was taken by: <input type="checkbox"/> Face-to-face interview <input type="checkbox"/> Mail <input checked="" type="checkbox"/> Telephone <input type="checkbox"/> Internet		Name and Address of Interviewer's Employer Mass Lending, LLC. 220 Reservoir Street, Suite 28 Needham Heights, MA 02494 (P) 781-433-8692 (F) 781-433-8699	
Interviewer's Name (print or type) Yashwan Kumar Interviewer's Signature: <u>[Signature]</u> Interviewer's Phone Number (incl. area code) 781-433-8692		Date: <u>11/21/05</u>	

11/08/2008 19:24 FAX 17814338699

MASS. LENDING

002/003

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Request for Verification of Employment

Privacy Act Notice: This information is to be used by the agency collecting it or its assignees in determining whether you qualify as a prospective mortgagor under its program. It will not be disclosed outside the agency except as required and permitted by law. You do not have to provide this information, but if you do not your application for approval as a prospective mortgagor or borrower may be delayed or rejected. This information requested in this form is authorized by Title 38, USC, Chapter 37 (if VA); by 12 USC, Section 1701 et seq. (if HUD/FHA); by 42 USC, Section 1452b (if HUD/CPD); and Title 42 USC, 1471 et seq., or 7 USC, 1921 et seq. (if USDA/FmHA).

Instructions: Lender - Complete items 1 through 7. Have applicant complete item 8. Forward directly to employer, named in item 1.
Employer - Please complete either Part II or Part III as applicable. Complete Part IV and return directly to lender named in item 2.
This form is to be transmitted directly to the lender and is not to be transmitted through the applicant or any other party.

Part I - Request

1. To (Name and address of employer)

HR Department
Quincy, MA 02169

2. From (Name and address of lender)

Kathleen Gagliardi
Mass Lending, LLC.
220 Reservoir Street, Suite 28
Needham Heights, MA 02494

I certify that this verification has been sent directly to the employer and has not passed through the hands of the applicant or any other interested party.

3. Signature of Lender

4. Title

Processor

5. Date

11/06/2006

6. Lender's No. (Optional)

I have applied for a mortgage loan and stated that I am now or was formerly employed by you. My signature below authorizes verification of this information.

7. Name and Address of Applicant (include employee or badge number)

Quincy, MA 02169

8. Signature of Applicant

SEE ATTACHMENT

Part II - Verification of Present Employment

9. Applicant's Date of Employment

6-6-05

10. Present Position

Staff RN

11. Probability of Continued Employment

N/A

12A. Current Gross Base Pay (Enter Amount and Check Period)

☐ Annual
☒ Hourly
☐ Monthly
☐ Other (Specify)
☐ Weekly

\$

13. For Military Personnel Only

Pay Grade
Type
Monthly Amount
Base Pay

14. If Overtime or Bonus is Applicable, is its Continuance Likely?

Overtime Yes ☐ No ☒
Bonus Yes ☐ No ☒

15. If paid hourly-average hours per week

16. Date of applicant's next pay increase

17. Projected amount of next pay increase

18. Date of applicant's last pay increase

6-6-06

19. Amount of last pay increase

12B. Gross Earnings

Type	Year To Date	Past Year	Past Year
Base Pay	Thru	\$	\$
Overtime	\$	\$	\$
Commissions	\$	\$	\$
Bonus	\$	\$	\$
Total	\$	\$	\$

Rations	\$
Flight or Hazard	\$
Clothing	\$
Quarters	\$
Pro Pay	\$
Overseas or	\$
Combat	\$
Variable Housing Allowance	\$

20. Remarks (if employee was off work for any length of time, please indicate time period and reason)

NEED INFO!

hospital policy
cannot answer

Part III - Verification of Previous Employment

21. Date Hired

23. Salary/Wage at Termination (Year)(Month)(Week)

22. Date Terminated

Base

Overtime

Commissions

Bonus

24. Reason for Leaving

25. Position Held

Part IV - Authorized Signature

Federal statutes provide severe penalties for any fraud, intentional misrepresentation, or criminal connivance or conspiracy purposed to influence the issuance of any guaranty or insurance by the VA Secretary, the U.S.D.A., FmHA/FHA Commissioner, or the HUD/CPD Assistant Secretary.

26. Signature of Employer

27. Title (Please print or type)

28. Date

29. Print or type name signed in item 26

30. Phone No.

11-7-06