

STERLING ASSOCIATES MANUFACTURED HOME FINANCING

TEL. (800) 286-8073 / FAX (508) 234-1557 / WWW.MHBANKER.COM / 49 CHURCH ST. WHITINSVILLE, MA 01588

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PURCHASE REFINANCE

NEW USED

INDIVIDUAL JOINT

PURCHASE PRICE		DOWN PAYMENT		FINANCE AMOUNT	
HOME MODEL YEAR	HOME MANUFACTURER	HOME LENGTH	HOME WIDTH	LOT RENT	
STREET ADDRESS OF MANUFACTURED HOME		CITY	STATE	ZIP CODE	
PARK NAME	SELLER/BROKER		HOW DID YOU HEAR OF US?		

APPLICANT

FULL NAME		SOCIAL SECURITY NUMBER		DATE OF BIRTH	ARE YOU A US CITIZEN? <input type="checkbox"/> YES <input type="checkbox"/> NO
CURRENT STREET ADDRESS		CITY	STATE	ZIP CODE	YEARS THERE
PREVIOUS STREET ADDRESS (IF LESS THAN 2 YRS AT CURRENT)		CITY	STATE	ZIP CODE	YEARS THERE
EMPLOYER NAME		POSITION/TITLE		ANNUAL INCOME	YEARS THERE
EMPLOYER STREET ADDRESS		CITY	STATE	ZIP CODE	
PREVIOUS EMPLOYER NAME (IF LESS THAN 2 YRS AT CURRENT)		POSITION/TITLE		ANNUAL INCOME	YEARS THERE
HOME PHONE	WORK PHONE	CELL PHONE		EMAIL ADDRESS	

CO-APPLICANT

FULL NAME		SOCIAL SECURITY NUMBER		DATE OF BIRTH	ARE YOU A US CITIZEN? <input type="checkbox"/> YES <input type="checkbox"/> NO
CURRENT STREET ADDRESS		CITY	STATE	ZIP CODE	YEARS THERE
PREVIOUS STREET ADDRESS (IF LESS THAN 2 YRS AT CURRENT)		CITY	STATE	ZIP CODE	YEARS THERE
EMPLOYER NAME		POSITION/TITLE		ANNUAL INCOME	YEARS THERE
EMPLOYER STREET ADDRESS		CITY	STATE	ZIP CODE	
PREVIOUS EMPLOYER NAME (IF LESS THAN 2 YRS AT CURRENT)		POSITION/TITLE		ANNUAL INCOME	YEARS THERE
HOME PHONE	WORK PHONE	CELL PHONE		EMAIL ADDRESS	

CREDIT INFORMATION (ALIMONY, CHILD SUPPORT, SEPARATE MAINTENANCE OR OTHER INCOME NEED NOT BE REVEALED IF APPLICANT(S) DO(ES) NOT WISH IT TO BE CONSIDERED IN DETERMINING YOUR QUALIFICATION FOR THIS LOAN)

HAS APPLICANT DECLARED BANKRUPTCY IN THE LAST 14 YEARS? <input type="checkbox"/> YES <input type="checkbox"/> NO		DOES APPLICANT MAKE CHILD SUPPORT OR ALIMONY PAYMENTS? <input type="checkbox"/> YES <input type="checkbox"/> NO			
REASON FOR FILING:		MONTHLY PAYMENT:		PAYMENTS END ON:	
HAS CO-APPLICANT DECLARED BANKRUPTCY IN THE LAST 14 YEARS? <input type="checkbox"/> YES <input type="checkbox"/> NO		DOES CO-APPLICANT MAKE CHILD SUPPORT OR ALIMONY PAYMENTS? <input type="checkbox"/> YES <input type="checkbox"/> NO			
REASON FOR FILING:		MONTHLY PAYMENT:		PAYMENTS END ON:	

ASSETS			LIABILITIES		
CURRENT ASSETS		TOTAL OF BALANCES	CREDIT CARDS/LINES OF CREDIT	MO. PAYMENT	TOTAL OF BALANCES
CHECKING/SAVINGS/MONEY MARKET ACCOUNTS					
BROKERAGE ACCOUNTS					
RETIREMENT ACCOUNTS (401K, IRA, ETC)					
TOTAL			TOTAL		
REAL ESTATE – PLEASE DESCRIBE	INCOME PROP?	ESTIMATED VALUE	REAL ESTATE LOANS	MO. PAYMENT	BALANCE
	<input type="checkbox"/> YES <input type="checkbox"/> NO				
TOTAL			TOTAL		
MISC. ASSETS (AUTOS, BOATS, RV'S, ETC) PLEASE DESCRIBE		ESTIMATED VALUE	MISC. LOANS	MO. PAYMENT	BALANCE
TOTAL			TOTAL		
TOTAL ASSETS			TOTAL LIABILITIES		
					NET WORTH

Declarations: About Your Finances

1. Are you a co-signer or guarantor on any debt or loan that is not disclosed on this application?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Are there any outstanding judgements against you?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Are you currently delinquent or in default of federal debt?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Are you a party to a lawsuit in which you potentially have any personal financial liability?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Have you conveyed title to any property in lieu of foreclosure in the past 7 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. Within the past 7 years, have you completed a pre-foreclosure sale or sort sale, whereby the property was sold to a third party and the Lender agreed to accept less than the outstanding mortgage balance due?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7. Have you had property foreclosed upon in the last 7 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No
8. Have you declared bankruptcy within the past 7 years? If YES, identify the type(s) of bankruptcy: <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13	<input type="checkbox"/> Yes <input type="checkbox"/> No

Demographic Information for Applicant and Co-Applicant

The purpose of collecting this information is to help ensure that all applicants are treated fairly and that the housing needs of communities and neighborhoods are being fulfilled. For residential mortgage lending, Federal law requires that we ask applicants for their demographic information (ethnicity, race, and sex) in order to monitor our compliance with equal credit opportunity, fair lending, and home mortgage disclosure laws. You are not required to provide this information, but are encouraged to do so. The law provides that we may not discriminate on the basis of this information, or whether you choose to provide it. However, if you choose not to provide the information and you have made this application in person, Federal regulations require us to note your ethnicity, race, and sex on the basis of visual observation or surname. The law also provides that we may not discriminate in the basis of age or marital status information that you provide in this application. Instructions: You may select one or more designations for "Ethnicity" and one or more designations for "Race". If you do not wish to provide some or all of this information, please check below

APPLICANT	CO-APPLICANT
<p>Ethnicity: - Check one or more</p> <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Mexican <input type="checkbox"/> Puerto Rican <input type="checkbox"/> Cuban <input type="checkbox"/> Other Hispanic – Enter origin: _____ <i>Examples: Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, etc.</i> <input type="checkbox"/> Not Hispanic or Latino <input type="checkbox"/> I do not wish to provide this information	<p>Ethnicity: - Check one or more</p> <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Mexican <input type="checkbox"/> Puerto Rican <input type="checkbox"/> Cuban <input type="checkbox"/> Other Hispanic – Enter origin: _____ <i>Examples: Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, etc.</i> <input type="checkbox"/> Not Hispanic or Latino <input type="checkbox"/> I do not wish to provide this information

<p>Race: - Check one or more</p> <p><input type="checkbox"/> American Indian or Alaska Native – Enter name of enrolled or principle tribe: _____</p> <p><input type="checkbox"/> Asian</p> <p><input type="checkbox"/> Asian Indian <input type="checkbox"/> Chinese <input type="checkbox"/> Filipino <input type="checkbox"/> Japanese <input type="checkbox"/> Vietnamese</p> <p><input type="checkbox"/> Other Asian – Enter Race: _____</p> <p><i>Examples: Hmong, Laotian, Thai, Pakistani, Cambodian, etc.</i></p> <p><input type="checkbox"/> Black or African American</p> <p><input type="checkbox"/> Native Hawaiian or Other Pacific Islander</p> <p><input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Guamanian or Chamorro <input type="checkbox"/> Samoan</p> <p><input type="checkbox"/> Other Pacific Islander – Enter race: _____</p> <p><i>Examples: Fijian, Tongan, etc.</i></p> <p><input type="checkbox"/> White</p> <p><input type="checkbox"/> do not wish to provide this information</p>	<p>Race: - Check one or more</p> <p><input type="checkbox"/> American Indian or Alaska Native – Enter name of enrolled or principle tribe: _____</p> <p><input type="checkbox"/> Asian</p> <p><input type="checkbox"/> Asian Indian <input type="checkbox"/> Chinese <input type="checkbox"/> Filipino <input type="checkbox"/> Japanese <input type="checkbox"/> Vietnamese</p> <p><input type="checkbox"/> Other Asian – Enter Race: _____</p> <p><i>Examples: Hmong, Laotian, Thai, Pakistani, Cambodian, etc.</i></p> <p><input type="checkbox"/> Black or African American</p> <p><input type="checkbox"/> Native Hawaiian or Other Pacific Islander</p> <p><input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Guamanian or Chamorro <input type="checkbox"/> Samoan</p> <p><input type="checkbox"/> Other Pacific Islander – Enter race: _____</p> <p><i>Examples: Fijian, Tongan, etc.</i></p> <p><input type="checkbox"/> White</p> <p><input type="checkbox"/> do not wish to provide this information</p>
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<p>Sex:</p> <p><input type="checkbox"/> Female</p> <p><input type="checkbox"/> Male</p> <p><input type="checkbox"/> I do not wish to provide this information</p>	<p>Sex:</p> <p><input type="checkbox"/> Female</p> <p><input type="checkbox"/> Male</p> <p><input type="checkbox"/> I do not wish to provide this information</p>
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<p>To be completed by Financial Institution (for application taken in person):</p> <p>Was the ethnicity of the applicant collected on the basis of visual observation or surname?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Was the race of the applicant collected on the basis of visual observation or surname?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Was the sex of the applicant collected on the basis of visual observation or surname?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>To be completed by Financial Institution (for application taken in person):</p> <p>Was the ethnicity of the applicant collected on the basis of visual observation or surname?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Was the race of the applicant collected on the basis of visual observation or surname?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Was the sex of the applicant collected on the basis of visual observation or surname?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
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<p>The Demographic Information was provided through:</p> <p><input type="checkbox"/> Face-To-Face Interview (includes Electronic Media w/ Video Component)</p> <p><input type="checkbox"/> Telephone Interview</p> <p><input type="checkbox"/> Fax or Mail</p> <p><input type="checkbox"/> Email or Interview</p>	<p>The Demographic Information was provided through:</p> <p><input type="checkbox"/> Face-To-Face Interview (includes Electronic Media w/ Video Component)</p> <p><input type="checkbox"/> Telephone Interview</p> <p><input type="checkbox"/> Fax or Mail</p> <p><input type="checkbox"/> Email or Interview</p>
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<p>Marital Status:</p> <p><input type="checkbox"/> Married <input type="checkbox"/> Unmarried* <input type="checkbox"/> Separated</p> <p>*Single, Divorced, Widowed, Civil Union, Domestic Partnership, Registered Reciprocal Beneficiary Relationship</p>	<p>Marital Status:</p> <p><input type="checkbox"/> Married <input type="checkbox"/> Unmarried* <input type="checkbox"/> Separated</p> <p>*Single, Divorced, Widowed, Civil Union, Domestic Partnership, Registered Reciprocal Beneficiary Relationship</p>
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All the statements I/We have made are true and correct, and I understand you will rely upon them. Any financial institution or finance company to which applicant or co-applicant (Or seller/broker on behalf of applicant or co-applicant) may apply for financing on the manufactured home described above is hereby authorized to investigate the credit history and capability of applicant or co-applicant. In connection with this credit application or any subsequent credit update or credit renewal, any proposed credit granting party may request a consumer report concerning the applicant and/or co-applicant. The applicant and/or co-applicant may ask whether the creditor obtained such a report. If such a report has been obtained, the applicant and/or co-applicant may request the name and address of the reporting agency that provided the report.

REGULATION B NOTICE – REQUIRED FOR JOINT APPLICATIONS (INTENT TO APPLY JOINTLY MUST BE SHOWN BY INITIALING THE LINES BELOW) WE INTEND TO APPLY FOR JOINT CREDIT: APPLICANT: _____ CO-APPLICANT: _____

PATRIOT ACT NOTICE – REQUIRED INFORMATION FOR ALL APPLICATIONS
To help the US Government fight the funding of terrorism and money laundering, federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account.

Applicant Driver's License #	State	Date Issued	Date Expires	CO-APPLICANT DRIVER'S LICENSE #	State	Date Issued	Date Expires
APPLICANT SIGNATURE				CO-APPLICANT SIGNATURE			
DATE				DATE			