

# APPLICATION BROKER PROGRAM

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Please answer all questions. Type or print.

## GENERAL INFORMATION

Date | \_\_\_\_\_ T.I.N. | \_\_\_\_\_

Company Name | \_\_\_\_\_

DBA | \_\_\_\_\_

Company Address | \_\_\_\_\_

| \_\_\_\_\_

| \_\_\_\_\_

Phone | ( ) \_\_\_\_\_ Fax | ( ) \_\_\_\_\_ E-mail | \_\_\_\_\_

Previous Address | \_\_\_\_\_

Have you previously done business with Eastern Savings Bank, fsb?  YES  NO

If YES, under what name? | \_\_\_\_\_

Have you previously done business under a different name?  YES  NO

If YES, under what name? | \_\_\_\_\_

Please indicate the month and year the company was started | \_\_\_\_\_

How long have you (the Partners or the Stockholders) owned this business? | \_\_\_\_\_

Projected sales volume this year \$ | \_\_\_\_\_ Last year \$ | \_\_\_\_\_

(Please note: Volume in reference to the principal balance of loans originated.)

Projected volume for Eastern Savings Bank \$ | \_\_\_\_\_

## PRINCIPAL OFFICERS

If a CORPORATION, please complete the following:

State and date of incorporation | \_\_\_\_\_

Name and home address (street, city, state, & zip)

President | \_\_\_\_\_

Vice President | \_\_\_\_\_

Secretary | \_\_\_\_\_

Treasurer | \_\_\_\_\_

continued...

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Stockholders (names, addresses, and % of ownership)

_____	%	_____
_____	%	_____
_____	%	_____
_____	%	_____

If a PARTNERSHIP, please indicate the partners' names and home addresses:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If a PROPRIETORSHIP, please indicate the name and home address:

\_\_\_\_\_

Are you an agent of a Title Insurance Company?  YES  NO

If YES, please provide the name, address, and phone number. \_\_\_\_\_  
\_\_\_\_\_

## REFERENCES

Please list three companies you have previously brokered loans to:

1. Company Name \_\_\_\_\_ Contact Name \_\_\_\_\_  
Company Address \_\_\_\_\_  
\_\_\_\_\_  
Phone | (      ) \_\_\_\_\_

2. Company Name \_\_\_\_\_ Contact Name \_\_\_\_\_  
Company Address \_\_\_\_\_  
\_\_\_\_\_  
Phone | (      ) \_\_\_\_\_

*continued...*

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3. Company Name | \_\_\_\_\_ Contact Name | \_\_\_\_\_

Company Address | \_\_\_\_\_

| \_\_\_\_\_

Phone | (     ) \_\_\_\_\_

Have you (the Partners or the Stockholders) ever been convicted of a felony?     YES     NO

If YES, please explain: | \_\_\_\_\_

| \_\_\_\_\_

| \_\_\_\_\_

COMMENTS:

*continued...*

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I hereby authorize Eastern Savings Bank, fsb and subsidiaries to obtain any and all information necessary in order for \_\_\_\_\_ to be approved as a broker.

*Company Name*

Name, Title, or Position | \_\_\_\_\_ Signature | \_\_\_\_\_

Social Security Number | \_\_\_\_\_ Date | \_\_\_\_\_

Name, Title, or Position | \_\_\_\_\_ Signature | \_\_\_\_\_

Social Security Number | \_\_\_\_\_ Date | \_\_\_\_\_