

# SANTA CRUZ HOME FINANCE

1535 Seabright Ave.  
Santa Cruz, CA 95062  
(831) 425-1250

## DOC REQUEST / FEE AGREEMENT

FAX # 1-831-425-1044

Date: \_\_\_\_\_  
Broker Co: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Broker Address: \_\_\_\_\_  
Contact: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

Borrower: \_\_\_\_\_ SSN: \_\_\_\_\_  
Co-Borrower: \_\_\_\_\_ SSN: \_\_\_\_\_  
Subject Address: \_\_\_\_\_  
VESTING: \_\_\_\_\_  
\*\* LIST THOSE TO BE ON TITLE ONLY \*\*  
\*\* \_\_\_\_\_  
\*\* \_\_\_\_\_  
\*\* \_\_\_\_\_

Escrow Co: \_\_\_\_\_ Escrow #: \_\_\_\_\_  
Address: \_\_\_\_\_  
Contact: \_\_\_\_\_ Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Loan Amt: \$ \_\_\_\_\_ Rate: \_\_\_\_\_ Term: \_\_\_\_\_ Program: \_\_\_\_\_  
Estimated Funding Date: \_\_\_\_\_ Lock Expires: \_\_\_\_\_  
Impounds YES / NO (circle one) Taxes Only: YES / NO (circle one)  
HELOC Draw Amount \$ \_\_\_\_\_

FEES	AMOUNT	POC	BALANCE DUE
ORIGINATION:	_____	_____	_____
REBATE:	_____	_____	_____
BROKER PROCESSING:	_____	_____	_____
*APPRAISAL:	_____	_____	_____
*CREDIT REPORT:	_____	_____	_____
*OTHER:	_____	_____	_____
CREDIT FOR NRCC'S:	_____	_____	_____
<b>TOTAL DUE BROKER:</b>	_____	_____	_____
SCHF ADMIN FEE:	_____	_____	_____
TAX SERVICE:	_____	_____	_____
DISCOUNT:	_____	_____	_____
APPR REVIEW:	_____	_____	_____
OTHER:	_____	_____	_____

### IN LIEU OF INVOICE FOR ALL 3RD PARTY FEES...

I, \_\_\_\_\_, \_\_\_\_\_ hereby  
(Name of Officer of Company) (Title of Officer)  
 Certify that the fee(s) relative to the above captioned loan file is/are as follows:

\$ _____	Appraisal Report	Vendor: _____
\$ _____	Credit Report	Vendor: _____
\$ _____	Other	Vendor: _____

We have not yet received the invoice from the vendor. We further agree to provide copies of invoices upon request if needed.

I understand that our company will be responsible for refunding any overage to the borrower(s) if, in the event of an audit, it is discovered that we have over charged the borrower(s).

\_\_\_\_\_  
(Signature of Officer of the Company) (Date)

\*An invoice must be provided or the In Lieu of Form above **must be completed** for the appraisal, credit report and **all other 3rd party charges**. We hereby assign all rights, title, and interest for the above referenced loan, in terms of appraisal and full credit package, without recourse to: Santa Cruz Home Finance. I hereby certify that all fees charged to the borrower reflect the actual fees incurred to process this loan. It is understood that Santa Cruz Home Finance strictly prohibits up charging on all third party fees. Pass through fees must reflect the Brokers actual costs.

BY: \_\_\_\_\_

\*\* THIS FORM MUST BE FILLED OUT COMPLETELY \*\*