



MDA Lending Solutions, Inc.
 Attn: Vendor Management
 5300 Brandywine Pkwy., Suite 100
 Wilmington, D.E. 19803
 Tel 888-751-9234 Option 3
 Fax 800-485-4570

Dear Licensed Real Estate Appraiser:

MDA Lending Solutions, Inc. (MDA Lending Solutions), a real estate information provider, is looking for licensed appraisers to perform Appraisal Services in your geographic area. In order to successfully work with MDA Lending Solutions, licensed appraisers should have the capability to access our website to accept and status orders, in addition to the ability to email completed reports. If online services are not available in your area, please contact us to make other arrangements. MDA Lending Solutions also requires disclosure of current license and E&O information for all licensed and trainee appraisers working for your organization.

We appreciate your reviewing and completing our application. Please note that in order to be paid as a MDA Lending Solutions vendor, our application, including a signed W9 form, is required. If you have questions, please contact our vendor management team at (888) 751-9234 option 3, or valuationvm@mdasolutions.com.

Real Estate Appraiser Application

Appraiser Name _____

MDA Lending Solutions requires that you complete and return the documents listed below prior to consideration of approval for our vendor network.

- | | |
|---|--|
| Completed Appraiser Application | <input type="checkbox"/> |
| Completed Appraiser Subcontractor Agreement | <input type="checkbox"/> |
| Initialed Statement of Work (Exhibit 1) | <input type="checkbox"/> |
| Valid License or Certificate (Copy Required for each appraiser) | <input type="checkbox"/> |
| Coverage Areas (Exhibit 2) | <input type="checkbox"/> |
| Fee Schedule (Exhibit 3) | <input type="checkbox"/> |
| E & O Insurance (Copy Required) | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <i>Minimum requirement is \$500,000 per incident and \$1,000,000 in aggregate.</i> | |
| Vendor Resume(s) | <input type="checkbox"/> |
| Completed Women and Minorities In Business Survey | <input type="checkbox"/> |
| EDI Work Samples (Email to valuationvm@mdasolutions.com) | <input type="checkbox"/> |
| <i>Include Form 1004, Form 704/2055, Multi-Family, and Condo (if applicable.)</i> | |
| MDA Lending Solutions Payment Policy | <input type="checkbox"/> |
| Direct Deposit Authorization | <input type="checkbox"/> |
| W-9 Form (SSN or Tax ID# _____ *REQUIRED FOR PAYMENT) | <input type="checkbox"/> |



Company Information

Self-employed Owner/Officer Partner Employee

Name: _____

Current Title: _____

Company/Individual: (as shown on W-9) _____

Phone: _____ Fax: _____ Cell (required): _____

E-mail: _____

Business Address: _____

City: _____ State _____ Zip Code: _____ County: _____

Payment Address (if different from above): _____

City: _____ State _____ Zip Code: _____ County: _____

During business hours, I prefer to be contacted: _____

Orders from MDA Lending Solutions will arrive via e-mail; logging into our website allows you to view and complete orders. Website instructions, along with your login and password, will be provided to you upon application approval.

Education & Training (Please include license information here):

| State/School/Program/Type: | Degree/ License: | Type/Number/Expiration Date: |
|----------------------------|--|------------------------------|
| _____ | <input type="checkbox"/> YES <input type="checkbox"/> NO | _____ |
| _____ | <input type="checkbox"/> YES <input type="checkbox"/> NO | _____ |
| _____ | <input type="checkbox"/> YES <input type="checkbox"/> NO | _____ |
| _____ | <input type="checkbox"/> YES <input type="checkbox"/> NO | _____ |

What amount of Errors and Omissions insurance do you carry? Please provide a copy. _____

Per Claim: _____ Aggregate: _____

Years of experience as a licensed appraiser (list experience by county for each appraiser in your organization; attach additional sheets as needed): _____

Special Memberships & Recognitions: _____

Appraiser Name _____



Appraisal Form Software Used (Please include version): _____

Please list any additional languages spoken: _____

Are you FHA approved? Yes _____ No _____ Exam Pass Date: _____

References:

Please list 3 references (name, address, and phone number). At least 1 reference must be a current or previous employer or business associate.

1) _____

2) _____

3) _____

Disciplinary Actions (If you answer yes to any question below, please attach a detailed explanation):

Have you ever been the subject of a lawsuit initiated by a lender or investor? **YES** **NO**

Have you ever had a claim filed against your Errors and Omissions Insurance? **YES** **NO**

Have you ever been the subject of disciplinary action by any state Appraisal Board? **YES** **NO**

****PLEASE SEND ALL ITEMS VIA FAX OR VIA E-MAIL (PDF) AS SOON AS POSSIBLE****

Fax: (800) 485-4570 Email: valuationvm@mdasolutions.com

MDA Lending Solutions, Inc.

ATTN: VENDOR MANAGEMENT

5300 Brandywine Pkwy. Suite 100 Wilmington, DE 19803

Appraiser Name _____



MDA Lending Solutions, Inc.
Attn: Vendor Management
5300 Brandywine Pkwy., Suite 100
Wilmington, D.E. 19803
Tel 888-751-9234 Option 3
Fax 800-485-4570

APPRAISER SUBCONTRACTOR AGREEMENT

AGREEMENT made as of the date set out below, between MDA Lending Solutions, Inc. located at 5300 Brandywine Parkway, Suite 100, Wilmington, DE 19803 (hereinafter referred to as "MDA Lending Solutions") and _____, and its agents, doing business at _____, (hereinafter referred to as "Appraiser"). MDA Lending Solutions and Appraiser are also known as "Party" or "Parties" as agreed.

WHEREAS, MDA Lending Solutions is engaged in consulting vendor management services for third party customers.

WHEREAS, the Appraiser desires to provide real estate appraisal services as set out in **Exhibit 1 ("Statement of Work")** and **Exhibit 3 ("Fees")** to MDA Lending Solutions, and is licensed to provide such services in various geographical areas in which MDA Lending Solutions conducts its business, as set out in **Exhibit 2 ("Coverage Areas")**.

Now, therefore the parties agree as follows.

1. AGREEMENT AND NATURE OF SERVICES: MDA Lending Solutions agrees to retain the Appraiser as a licensed independent subcontractor to provide real estate appraisal services. Appraiser agrees to provide such services upon the terms and conditions of this Agreement as set out in the statement of work attached as Exhibit 1. In performing the services specified in this Agreement, it is the parties' intent that the Appraiser shall be acting solely as an independent contractor, practicing his/her profession and will perform such services in accordance with currently recognized industry methods, standards and practices. Appraiser further agrees that this is a non-exclusive Agreement and MDA Lending Solutions may engage other Appraisers to do its work as MDA Lending Solutions sees fit.

2. TERM: This Agreement commences on the dates set out below and will continue until terminated by either party in writing by giving thirty (30) days prior written notice to the respective party.

3. EXPENSES: The Appraiser shall pay all out-of-pocket expenses necessary in the performance of the services which are contracted for. These expenses shall customarily include fees and other costs associated with professional designations and organizations, and any other expenses incurred during the normal course of business by the Appraiser. The Appraiser releases MDA Lending Solutions from any liability or payment obligation with regard to social security taxes, State disability, unemployment insurance, and workers' compensation insurance (collectively "Appraiser costs"). It is clearly intended and agreed to by the Appraiser, that the Appraiser shall bear 100% of the Appraiser costs and the payment thereof. It is also clearly intended that the Appraiser is not an employee of MDA Lending Solutions, and that the Appraiser is personally responsible for satisfying all federal and state employment related expenses and filings, taxes and insurance coverage.



- 4. TRIP FEES:** If the appraiser has an appointment and the homeowner is not available or cancels the appointment after the appraiser arrives at the subject property, and the lender cancels the order, MDA Lending Solutions will pay a maximum trip fee of \$50 ONLY if a trip fee is paid to MDA Lending Solutions from the lender. If the appraiser has an appointment but the homeowner is not available or cancels the appointment after the appraiser arrives at the subject property, but reschedules the appointment and an appraisal is eventually completed, MDA Lending Solutions will only pay the vendor for the completed appraisal. No additional trip fee will be paid to the appraiser for the initial trip to the subject property.
- 5. FEES GENERATED:** All fees, which are charged or collected from third parties by MDA Lending Solutions for the services of real estate appraising contracted for, shall be the sole and exclusive property of MDA Lending Solutions.
- 6. PROFESSIONAL LIABILITY INSURANCE:** The appraiser agrees to maintain a professional liability insurance policy, in the minimum amount of \$500,000 per incident and \$1,000,000 in aggregate, during the entire term of this agreement.
- 7. NOTICE OF ABSENCE:** In the event that the principal named as the Appraiser will be absent from his/her primary place of business for any reason that will affect the Appraiser's performance hereunder, the Appraiser will promptly notify MDA Lending Solutions of such absence.
- 8. RELATIONSHIP BETWEEN PARTIES:** Nothing contained in this Agreement shall be construed as establishing a partnership, agency, employment or joint venture between the parties. The Appraiser shall have no authority to bind MDA Lending Solutions by any promise or representation unless specifically authorized to do so in writing by MDA Lending Solutions. In no respect shall the Appraiser be considered, under the provisions in this Agreement or otherwise, with having an "employee" status or being entitled to participate in any plans, arrangements, or distributions by MDA Lending Solutions pertaining to or in connection with any pensions, stock, bonus, profit sharing or similar benefits for MDA Lending Solutions' employees.
- 9. GRAMM-LEACH-BLILEY ACT:** To the extent that regulations promulgated under the Gramm-Leach-Bliley Act, 15USC1608 et seq ("G-L-B") or any other relevant law require additional or modified security, privacy, or confidentiality agreements between financial institution and MDA Lending Solutions as a vendor, each party including subcontractor Appraisers agrees that it will execute such additional or modified agreements as required. Each party will make a good faith effort to ensure that any additional or modified agreements comply with the requirements of G-L-B, any implementing regulations, or any other relevant law, but either party does not warrant that such modifications will be in legal compliance with G-L-B.
- 10. CONFIDENTIALITY:** Appraiser on its own behalf and on behalf of its personnel, agrees that any and all Confidential Information is and shall remain the property of the Disclosing Party, shall be held in strict confidence by Appraiser and its personnel, shall not be used for the Appraiser's own or any other person's advantage to the disadvantage of the Disclosing Party, and shall not be used other than to perform Services. Appraiser, on its own behalf and on behalf

Appraiser Name _____



of its personnel, may disclose Confidential Information to any third person only with the prior written consent of the Disclosing Party; provided, however, that Appraiser may disclose Confidential Information to third persons in connection and in accordance with the discharge of its obligations under this Agreement. Except as required by applicable law, Appraiser, on its own behalf and on behalf of its personnel, agrees to keep any and all information confidential with respect to the pricing of Services.

"Disclosing Party" means MDA Lending Solutions, an affiliate thereof or any financial institution ("Financial Institution") which discloses Confidential Information to Appraiser.

"Confidential Information" means all technical, business, personnel, taxpayer or other information, including, without limitation, Financial Institution, MDA Lending Solutions, customer, or client information, however, communicated by a Disclosing Party to Appraiser, relating to past, present or future research, development, and business activities of the Disclosing Party. Confidential Information shall not include information which (i) is or becomes generally available to the public other than by the acts or omissions of Appraiser or its personnel; (ii) was known by Appraiser prior to the disclosure of the same by the Disclosing Party, and was not obtained from any person in violation of an obligation of confidentiality to the Disclosing Party; or (iii) is required to be disclosed pursuant to applicable law or legal process.

11. PRIVACY: Appraiser acknowledges that Financial Institutions require MDA Lending Solutions and its vendors and other subcontractors to adhere to and comply with all relevant privacy laws, including, without limitation, the Gramm – Leach – Bliley Act, 15 USC § 6801, et. seq., as may be amended from time to time ("Privacy Laws") and privacy standards in accordance with policies adopted by such Financial Institutions ("Privacy Policies"). In performing Services pursuant to this Agreement, (i) from and after the Effective Date, Appraiser agrees to adhere to and to comply with any and all Privacy Laws and (ii) from and after the date upon which MDA Lending Solutions delivers a Privacy Policy to Appraiser, Appraiser agrees to adhere to and comply with any such Privacy Policy.

12. OWNERSHIP OF INTELLECTUAL PROPERTY: MDA Lending Solutions expressly retains all right, title and interest in all patents, trademarks, trade names, trade dress, trade secrets, software, know-how or other legally cognizable intellectual property rights (collectively, "Intellectual Property") that arise out of or are in any way related to this Agreement or MDA Lending Solutions' provision of services to Financial Institutions and Appraiser acknowledges that all Intellectual Property is owned, solely and exclusively, by MDA Lending Solutions or its licensors. At no time during the Term or any renewal term or thereafter shall Appraiser acquire any property right or other interest in, or appropriate for its own use any of, the Intellectual Property.

13. NOTICE OF PROVISION: If Appraiser receives a notice of a claim adverse to MDA Lending Solutions or its interests that concerns the violation of the G-L-B Act by unauthorized disclosure of confidential or private information disclosed to the Appraiser, or a challenge is made to the ownership of MDA Lending Solutions covering the Intellectual Property of MDA Lending Solutions or if the Appraiser is required by a governmental agency or law to disclose

Appraiser Name _____



any of the Proprietary information of MDA Lending Solutions, the Appraiser must, if legally permissible, first give written notice of such required disclosure to MDA Lending Solutions, make a reasonable effort to obtain a protective order requiring that the Proprietary Information so disclosed be used only for the purposes for which disclosure is required, take reasonable steps to allow MDA Lending Solutions to seek to protect the confidentiality of the Proprietary Information required to be disclosed, and will disclose only that part of the Proprietary information which, in the written opinion of its legal counsel, it is required to disclose.

Each Party to this Agreement will immediately notify the other Party in writing upon discovery of any loss or unauthorized disclosure of the Proprietary Information of the other Party.

14. MISCELLANEOUS. The parties agree:

- i. MDA Lending Solutions may assign any of its rights under this Agreement without the consent of the Appraiser;
- ii. That this Agreement shall be construed with and governed in accordance with the laws of the State of Delaware;
- iii. That this Agreement shall be binding upon the parties hereto, their respective heirs, legal representatives, successors and assigns;
- iv. That this instrument contains the entire Agreement between the parties and may not be changed orally, but only by a written Agreement signed by both parties;
- v. That the Appraiser shall at all times uphold and conduct themselves in a manner that reflects well on the name of MDA Lending Solutions;
- vi. That Financial Institutions and their customers for whom services are procured under this Agreement are third party beneficiaries of Appraiser's obligations under this Agreement.
- vii. If any provision of this Agreement is found by a proper authority to be unenforceable or invalid, such unenforceability or invalidity will not render this Agreement unenforceable or invalid as a whole; rather, this Agreement will be construed as if not containing the particular invalid or unenforceable provision or portion thereof, and the rights and obligations of the Parties hereto will be construed and enforced accordingly. In such event, the Parties will negotiate in good faith a replacement provision that would best accomplish the objectives of such unenforceable or invalid provision within the limits of applicable law or applicable court decision;
- viii. Unless otherwise specified in writing by MDA Lending Solutions, Appraiser will not disclose that MDA Lending Solutions is a customer of Appraiser and will not use the name "MDA Lending Solutions" or any mark, logo or trade name owned or used by MDA Lending Solutions; and
- ix. Headings of particular sections are inserted only for convenience and are not to be considered a part of this Agreement or be used to define, limit or construe the scope of any term or provision of this Agreement. Should any provision of this Agreement require judicial interpretation, the Parties agree that the court interpreting or construing the same

Appraiser Name _____



will not apply a presumption that the terms and conditions of this Agreement will be more strictly construed against one Party than against the other Party.

IN WITNESS WHEREOF, the parties have signed this Agreement as of the date set out below.

MDA Lending Solutions, Inc.

Real Estate Appraiser/Company Name

Date

Date

Appraiser Name _____



EXHIBIT 1 - STATEMENT OF WORK

We are glad you are our partner. In assigning orders to our approved partners, we consider turnaround time, pricing, and quality of service. Our goal is to provide you with the support you need to complete assignments in an expedient manner. We pride ourselves on prompt and courteous service and feel the key to our success is providing you with a fast and reliable payment for your service that is hassle free. Below you will find the standards of conduct, policies and procedures we expect you to follow in turn:

1. MDA Lending Solutions uses email and/or fax transmission to place our orders with you. In addition, you may log into our website at <https://valuations.mdasolutions.com> to accept and update orders sent by our MDA Track system. A user's guide to MDA Track will be provided to you. If you have any problems logging on to the website contact Vendor Management at 1-888-751-9234, Option 3 for further assistance.
2. It is important that you communicate to MDA Lending Solutions your acceptance of an appraisal order within **two (2) hours** from the time of order placement (receipt). If MDA Lending Solutions does not receive an acceptance confirmation within **four (4) hours**, the order will be redirected.
3. Unless otherwise indicated on the order, contact the borrower and arrange for an appointment within **24 hours** from the time of order placement (receipt). Please notify us of all attempts to contact the homeowner via MDA Lending Solutions' website, or by using the contact information supplied on each order (orders may be assigned by different appraisal processors, depending on geographic area and/or client). **Daily status on each order is required.**
4. Each appraisal appointment should be scheduled as soon as possible after receipt of the order. The appointment time should be made at the earliest convenience of the homeowner; if necessary, ask the homeowner for specific directions to the property when you schedule the appointment. Make every effort to set the appointment time within **24 hours** of receipt of the order. **MDA Lending Solutions must be notified of the date and time of appointment.** If you have trouble scheduling the appointment, or difficulty obtaining information necessary to proceed with the order, alert MDA Lending Solutions immediately so we may assist you. **Please remember to confirm your appointment with the borrower. MDA Lending Solutions, Inc. may not be able to collect trip fees from lenders, and therefore may not be able to pay for trip fees.**
5. Always wear business casual attire when attending appointments, and **be on time for each appointment.** Attend the appointment alone. Please do not bring anyone to the appointment unless they are an appraiser or in training to become an appraiser. Children, friends, or pets should never attend an appointment with you, even if they remain in your vehicle. **When arriving at the property, always identify yourself to the homeowner immediately** and provide them with an estimated time it will take you to complete your work in and around their home. Always politely answer homeowner questions regarding the appraisal. Please do not state your opinion or engage the homeowner in conversation on any topic other than information needed to complete the appraisal. **Announce your departure from the property.**
6. All completed appraisal reports should be submitted to MDA Lending Solutions **within 24 hours** following the inspection of the property. Every effort should be made to return completed reports to MDA Lending Solutions within **three (3) to four (4) days** from the date the order was **ASSIGNED** to the appraiser. **Please review each order for specific turn time instructions. MDA Lending Solutions orders can have turn times as tight as 24 hours depending on the product.** Appraisal reports should be uploaded to the website. If you do not have upload or email capability, please fax a copy of the appraisal, along with any applicable addenda or documents, using the contact information supplied on each order.
7. **Each file must be reviewed and approved by our internal Review Department.** If adjustments are required, the reviewer will contact you through e-mail or fax. Your revisions must be completed and forwarded to us **immediately.** Any delay at this point is a disservice to our customers.

Vendor Name _____



8. The appraiser agrees to complete each request in accordance with client requirements, all laws, regulations, and standard practices of the real estate appraising consulting industry.

Initials _____

Vendor Name _____



Exhibit 2 - Coverage Areas

| State | County Name | ZIP Codes to exclude/include (for partial coverage)* | Coverage Group (1, 2, 3, or 4) [†] | Notes [‡] |
|-------|-------------|--|--|--------------------|
| | | <input type="checkbox"/> Include <input type="checkbox"/> Exclude: | | |
| | | <input type="checkbox"/> Include <input type="checkbox"/> Exclude: | | |
| | | <input type="checkbox"/> Include <input type="checkbox"/> Exclude: | | |
| | | <input type="checkbox"/> Include <input type="checkbox"/> Exclude: | | |
| | | <input type="checkbox"/> Include <input type="checkbox"/> Exclude: | | |
| | | <input type="checkbox"/> Include <input type="checkbox"/> Exclude: | | |
| | | <input type="checkbox"/> Include <input type="checkbox"/> Exclude: | | |
| | | <input type="checkbox"/> Include <input type="checkbox"/> Exclude: | | |
| | | <input type="checkbox"/> Include <input type="checkbox"/> Exclude: | | |
| | | <input type="checkbox"/> Include <input type="checkbox"/> Exclude: | | |
| | | <input type="checkbox"/> Include <input type="checkbox"/> Exclude: | | |
| | | <input type="checkbox"/> Include <input type="checkbox"/> Exclude: | | |
| | | <input type="checkbox"/> Include <input type="checkbox"/> Exclude: | | |
| | | <input type="checkbox"/> Include <input type="checkbox"/> Exclude: | | |

*Please indicate any partially covered counties by excluding or including ZIP Codes for those counties. Attach additional pages if needed.

[†]MDA Lending Solutions' system allows up to four different fee entries per product, based on "groups" of counties ("1" for the primary coverage area, "2" for secondary, etc.). If your fees vary by county, please indicate this by group number for each county on this form.

[‡] Please indicate any counties your appraisers reside in.

Appraiser Name _____



Exhibit 3 – Fees

| Appraisal Form | Coverage Group 1 | Coverage Group 2 | Coverage Group 3 | Coverage Group 4 |
|--|------------------|------------------|------------------|------------------|
| <i>EXAMPLE APPRAISAL FEE</i> | \$ 125.00 | \$ 150.00 | N/A | N/A |
| 1004 URAR Single Family | | | | |
| 1004 URAR REO/Foreclosure | | | | |
| Condo - FHLMC465/FNMA1073 | | | | |
| 1075 Exterior-only Condo | | | | |
| 2055/2065 Exterior (No Comp Photos) | | | | |
| 2055/2065 Exterior (With Comp Photos) | | | | |
| 2055/2065 Interior (No Comp Photos) | | | | |
| 2055/2065 Interior (With Comp Photos) | | | | |
| 2070 Freddie Mac Exterior | | | | |
| 2075 Fannie Mae Exterior | | | | |
| 2095 Exterior-only Coop | | | | |
| 442 Satisfactory Completion Inspection | | | | |
| 704 Exterior (No Comp Photos) | | | | |
| 704 Exterior (With Comp Photos) | | | | |
| 704 Interior (No Comp Photos) | | | | |
| 704 Interior (With Comp Photos) | | | | |
| Additional Comps | | | | |
| CMV Assisted Appraisal (CMVAA) | | | | |
| COOP - Co-operative Appraisal | | | | |
| Desk Review | | | | |
| Desktop Valuation | | | | |
| ERC95 - Employee Relocation | | | | |

Appraiser Name _____



Exhibit 3 – Fees

| Appraisal Form | Coverage Group 1 | Coverage Group 2 | Coverage Group 3 | Coverage Group 4 |
|--|------------------|------------------|------------------|------------------|
| FHA - 1 Unit | | | | |
| FHA - 2 Units | | | | |
| FHA - 3 Units | | | | |
| FHA - 4 Units | | | | |
| 203K1 - 1 Unit | | | | |
| 203K2 - 2 Units | | | | |
| 203K3 - 3 Units | | | | |
| 203K4 - 4 Units | | | | |
| FFR - Field Review | | | | |
| INSP - Construction Draw Inspection | | | | |
| LAND - Vacant Land Rpt | | | | |
| Letter of Inspection | | | | |
| MHAR - Manufactured Home Appraisal Rpt | | | | |
| OIS - Operating Income Statement | | | | |
| ROV - Recertification of Value | | | | |
| SFR - Single Family Rent Schedule | | | | |
| SRIP - Multi 2-4 Family | | | | |

Trip Fees: If the appraiser has an appointment and the homeowner is not available or cancels the appointment after the appraiser arrives at the subject property, and the lender cancels the order, MDA Lending Solutions will pay a maximum trip fee of \$50 ONLY if a trip fee is paid to MDA Lending Solutions from the lender. If the appraiser has an appointment but the homeowner is not available or cancels the appointment after the appraiser arrives at the subject property, but reschedules the appointment and an appraisal is eventually completed, MDA Lending Solutions will only pay the vendor for the completed appraisal. No additional trip fee will be paid to the appraiser for the initial trip to the subject property.

Payment Policy: Upon receipt from your establishment of final paperwork/EDI on an order, which includes receipt of any requested corrections, we date stamp this in our MDA Track system. Payments are made based on this date stamp. As a general rule, payment is made every two weeks for files completed within a given period. Any dispute of the Vendor Invoice Detail must be made by written notice of the dispute within sixty days of the date of the Vendor Invoice Detail.

Appraiser Name _____

Completion Instructions for Minority/Women-owned Business form

Section 1–General Information: Please verify name, address, phone number and type of enterprise.

Section 2–Enterprise Ownership & Minority/Women–Owned/Small Disadvantage Business: Please identify ownership, business classification, and type of business. If your business is minority/women-owned, a small disadvantaged business, or is located in a HUBZone, please provide the proper documentation in order to certify your business as such.

Section 3– Certification: Please assign a designated company representative to sign the form. Please be sure to print the name and title of the individual.

General Definitions for Minority–Owned/Women–Owned/Small Disadvantage Business/HUBZone Business

Minority/Women–Owned Business: Any for profit enterprise, regardless of size, which is at the least 51% owned, operated, and controlled by one or more minorities or women who meet all of the following criteria:

- Have ultimate fiscal and legal control of the business.
- Operate the daily management of the business.
- Was either the original owner(s) of the existing business or verified purchaser(s).
- Note: Transfer of ownership or purchase of existing business by a minority from a non-minority or by a woman or minority woman from a non-minority male, who remain(s) actively involved in the operations of the business, does not qualify as a minority or women owned business enterprise.

Minority Classification:

- African Americans, Includes those having origins in any of the black racial groups of Africa (not having Hispanic origin).
- Native Americans, Includes those of Mexican, Puerto Rican, Cuban, Caribbean, and Central or South American Origin.
- Asian and Asian Subcontinent-Pacific Americans: Includes those having origins from Japan, China, Taiwan, Korea, Vietnam, Laos, Cambodia, Philippines, Samoa, Guam, India, Pakistan, Bangladesh, the U.S. Trust Territories of the Pacific, and Northern Marianas.
- Other Minority or Ethnic Groups- Including those recognized by the Small Business Administration pursuant to section 8(a) of the small Business Act.

Independent Business: A business is not independent if another business controls or has the power to control the business, directs or influences the operation of the business. An eligible minority/woman owned business must be an independent business.

Small Disadvantage Business: A small business concern that is 51% owned by one or more individuals who are both socially and economically disadvantaged. This can include a publicly owned business that has at least 51% of its stock unconditionally owned by one or more socially and economically disadvantaged individuals, and whose management and daily business is controlled by one or more such individuals.

HUBZone Business: To participate in the HUBZone Empowerment Contracting Program, a concern must be determined to be a “qualified HUBZone small business concern.” A firm can be found to be a qualified HUBZone concern, if it meets all of the following criteria:

- It is small.
- It is located in a “historically underutilized business zone.” (HUBZone)
- It is owned and controlled by one or more U.S. citizens.
- At least 35% of its employees reside in a HUBZone.

Ownership Information Questionnaire

Please complete, verify, sign, and return this form within five days.

Section 1 - General Company Information

| | | | |
|---------------------------------|--|---------------------------|------------|
| Company Name: | | | |
| DBA/former company Name: | | | |
| Street Address: | | | |
| City | | State | Zip |
| Telephone (w/area code): | | Fax (w/area code): | |

Section 2—Enterprise ownership and minority/women owned and/or SDB Certification

| <i>(Ownership-The above business is owned, controlled, and operated by:)</i> | Male | Female | Business Class | Type of Business |
|--|------------------------------|-----------------------------|---------------------------------|-------------------------------|
| Non-minority | __ % | __ % | Corporation | Service provider |
| Asian-Pacific | __ % | __ % | Limited proprietorship | Contractor |
| African Americans | __ % | __ % | Government agency | Distributor |
| Hispanic Americans | __ % | __ % | General partnership | Manufacturer |
| Native Americans | __ % | __ % | Nonprofit organization | Retailer |
| Other; Specify | __ % | __ % | Individual | Factory Representative |
| Disabled Veteran: | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Other (specify) _____ | |
| Small Business: | <input type="checkbox"/> Yes | <input type="checkbox"/> No | | |
| Small Disadvantaged Business (SDB): | | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Are you certified as minority/women owned business and/or as an SDB? | | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| If yes, which government entity or minority council certified your firm? <i>(Please enclose a copy of the M/WBE and/or SDB certification with this questionnaire.)</i> | | | | |
| If you are a minority/women owned business and are NOT certified, are you in the process of obtaining M/WBE and/or SDB certification? | | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does your business qualify under the SBA's HUBZone Program? | | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Section 3—Certification (per instructions in cover letter)

I certify that, under the applicable federal laws, the information shown in Section 2 (if applicable) is true and Correct.

Signed

Date

Name (printed)

Title



MDA Lending Solutions, Inc.

PAYMENT POLICY

The following information is provided by way of example and should not be construed as definitive.

All appraisers and real estate professionals that perform services for **MDA Lending Solutions, Inc.** are paid in the following manner: Upon receipt from your establishment of the final report on an order, which includes receipt of any requested corrections, a date stamp is placed in our MDA Track system. Payments are made based on this stamp/invoice date. As a general rule, payments are processed every two weeks for files completed within a given period. Payment is contingent upon MDA Lending Solutions having a completed application and signed W9 form on file for your account.

Check cut date:

1/18/07
2/1/07

Covers orders completed between:

12/24/06 - 1/6/07
1/7/07 - 1/20/07

There are no exceptions to this payment policy (such as rush payment for rush orders). Please allow a few days after check cut date for mailing time.

If you do not receive payment or received an incorrect payment on a specific order/case within the given time frame please contact our Vendor Management Department at 888-751-9234 Option 3.

If you are inquiring about more than one file we suggest that you fax your request over to us at 800-485-4606 listing the seven-digit file/case # (the property address is also helpful). We will research these files and follow up with you relative to your inquiry. **The fee listed on the order at the time of assignment is the fee you will be paid unless you have received a written notice from MDA Lending Solutions listing a new fee. Payment disputes will only be considered and reviewed when orders have been completed within the last 60 days. Please ensure your records are up to date.**

Appraiser Name _____



MDA Lending Solutions, Inc.
 Attn: Vendor Management
 5300 Brandywine Pkwy., Suite 100
 Wilmington, DE 19803
 Tel (888) 751-9234 Option 3 or Fax (800) 485-4606

DIRECT DEPOSIT AUTHORIZATION AGREEMENT

ACCOUNTS PAYABLE - FOR VENDORS

Please complete this direct deposit authorization form carefully and legibly, and return both **the form and a voided check** by fax to 800-485-4606 Attn: Vendor Management, by email to paymentvm@mdasolutions.com, or by mail to the address listed above. **Please remember to include both the authorization form and a voided check.** If using a savings account, include a deposit slip or a letter from your bank with your account number and your bank's routing number.

Please allow at least 30 days for your information to be processed. You may receive a standard check during this time if orders are completed and ready to pay. Once you are active on direct deposit, you will receive a non-negotiable direct deposit advice, which looks **very similar** to a check. The date on the advice is the date the deposit will be made into your account. If at any time you change your banking information, please notify us immediately.

(PLEASE TYPE OR PRINT IN INK)

DATE: ____/____/____ START CHANGE CANCEL

I hereby authorize MDA Lending Solutions, Inc. to initiate direct deposit transactions to my account at the financial institution indicated below:

Name of Financial Institution _____

City, State _____ Telephone Number _____

Account Number _____ Routing Number _____

This authority is to remain in full effect until MDA Lending Solutions has received thirty day written notice, or until MDA Lending Solutions or the participating institution has sent me ten day written notice, of its termination of this arrangement.

Vendor Number _____

Vendor Name _____

Address _____

City _____ State _____ ZIP Code _____

Phone Number _____ Email Address _____

Signature _____

Printed Name _____

SELECT ONLY ONE: Checking Account Savings Account

(ATTACH YOUR VOIDED CHECK OR DEPOSIT SLIP IN THIS SPACE)

Request for Taxpayer Identification Number and Certification

**Give form to the
 requester. Do not
 send to the IRS.**

| | | |
|---|--|---|
| Print or type See Specific Instructions on page 2. | Name (as shown on your income tax return) | |
| | Business name, if different from above | |
| | Check appropriate box: <input type="checkbox"/> Individual/Sole proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶ <input type="checkbox"/> Exempt payee <input type="checkbox"/> Other (see instructions) ▶ | |
| | Address (number, street, and apt. or suite no.) | Requester's name and address (optional) |
| | City, state, and ZIP code | |
| | List account number(s) here (optional) | |

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

| |
|--------------------------------|
| Social security number |
| or |
| Employer identification number |

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. See the instructions on page 4.

| | | |
|------------------|----------------------------|--------|
| Sign Here | Signature of U.S. person ▶ | Date ▶ |
|------------------|----------------------------|--------|

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,

- The U.S. grantor or other owner of a grantor trust and not the trust, and
- The U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person, do not use Form W-9. Instead, use the appropriate Form W-8 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a “saving clause.” Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity not subject to backup withholding, give the requester the appropriate completed Form W-8.

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments. This is called “backup withholding.” Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the Part II instructions on page 3 for details),
3. The IRS tells the requester that you furnished an incorrect TIN,

4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or

5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the instructions below and the separate Instructions for the Requester of Form W-9.

Also see *Special rules for partnerships* on page 1.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Name

If you are an individual, you must generally enter the name shown on your income tax return. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first, and then circle, the name of the person or entity whose number you entered in Part I of the form.

Sole proprietor. Enter your individual name as shown on your income tax return on the “Name” line. You may enter your business, trade, or “doing business as (DBA)” name on the “Business name” line.

Limited liability company (LLC). Check the “Limited liability company” box only and enter the appropriate code for the tax classification (“D” for disregarded entity, “C” for corporation, “P” for partnership) in the space provided.

For a single-member LLC (including a foreign LLC with a domestic owner) that is disregarded as an entity separate from its owner under Regulations section 301.7701-3, enter the owner’s name on the “Name” line. Enter the LLC’s name on the “Business name” line.

For an LLC classified as a partnership or a corporation, enter the LLC’s name on the “Name” line and any business, trade, or DBA name on the “Business name” line.

Other entities. Enter your business name as shown on required federal tax documents on the “Name” line. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on the “Business name” line.

Note. You are requested to check the appropriate box for your status (individual/sole proprietor, corporation, etc.).

Exempt Payee

If you are exempt from backup withholding, enter your name as described above and check the appropriate box for your status, then check the “Exempt payee” box in the line following the business name, sign and date the form.

Generally, individuals (including sole proprietors) are not exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends.

Note. If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding.

The following payees are exempt from backup withholding:

1. An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2),
2. The United States or any of its agencies or instrumentalities,
3. A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities,
4. A foreign government or any of its political subdivisions, agencies, or instrumentalities, or
5. An international organization or any of its agencies or instrumentalities.

Other payees that may be exempt from backup withholding include:

6. A corporation,
7. A foreign central bank of issue,
8. A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States,
9. A futures commission merchant registered with the Commodity Futures Trading Commission,
10. A real estate investment trust,
11. An entity registered at all times during the tax year under the Investment Company Act of 1940,
12. A common trust fund operated by a bank under section 584(a),
13. A financial institution,
14. A middleman known in the investment community as a nominee or custodian, or
15. A trust exempt from tax under section 664 or described in section 4947.

The chart below shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 15.

| IF the payment is for . . . | THEN the payment is exempt for . . . |
|--|--|
| Interest and dividend payments | All exempt payees except for 9 |
| Broker transactions | Exempt payees 1 through 13. Also, a person registered under the Investment Advisers Act of 1940 who regularly acts as a broker |
| Barter exchange transactions and patronage dividends | Exempt payees 1 through 5 |
| Payments over \$600 required to be reported and direct sales over \$5,000 ¹ | Generally, exempt payees 1 through 7 |

¹ See Form 1099-MISC, Miscellaneous Income, and its instructions.

² However, the following payments made to a corporation (including gross proceeds paid to an attorney under section 6045(f), even if the attorney is a corporation) and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, and payments for services paid by a federal executive agency.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner (see *Limited liability company (LLC)* on page 2), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note. See the chart on page 4 for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local Social Security Administration office or get this form online at www.ssa.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/businesses and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting www.irs.gov or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note. Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded domestic entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if items 1, 4, and 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). Exempt payees, see *Exempt Payee* on page 2.

Signature requirements. Complete the certification as indicated in 1 through 5 below.

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

Secure Your Tax Records from Identity Theft

Identity theft occurs when someone uses your personal information such as your name, social security number (SSN), or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

Call the IRS at 1-800-829-1040 if you think your identity has been used inappropriately for tax purposes.

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes. Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS personal property to the Treasury Inspector General for Tax Administration at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: spam@uce.gov or contact them at www.consumer.gov/idtheft or 1-877-IDTHEFT(438-4338).

Visit the IRS website at www.irs.gov to learn more about identity theft and how to reduce your risk.

What Name and Number To Give the Requester

| For this type of account: | Give name and SSN of: |
|---|---|
| 1. Individual | The individual |
| 2. Two or more individuals (joint account) | The actual owner of the account or, if combined funds, the first individual on the account ¹ |
| 3. Custodian account of a minor (Uniform Gift to Minors Act) | The minor ² |
| 4. a. The usual revocable savings trust (grantor is also trustee) | The grantor-trustee ¹ |
| b. So-called trust account that is not a legal or valid trust under state law | The actual owner ¹ |
| 5. Sole proprietorship or disregarded entity owned by an individual | The owner ³ |
| For this type of account: | Give name and EIN of: |
| 6. Disregarded entity not owned by an individual | The owner |
| 7. A valid trust, estate, or pension trust | Legal entity ⁴ |
| 8. Corporate or LLC electing corporate status on Form 8832 | The corporation |
| 9. Association, club, religious, charitable, educational, or other tax-exempt organization | The organization |
| 10. Partnership or multi-member LLC | The partnership |
| 11. A broker or registered nominee | The broker or nominee |
| 12. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments | The public entity |

¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

² Circle the minor's name and furnish the minor's SSN.

³ You must show your individual name and you may also enter your business or "DBA" name on the second name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

⁴ List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships* on page 1.

Note. If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons who must file information returns with the IRS to report interest, dividends, and certain other income paid to you, mortgage interest you paid, the acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA, or Archer MSA or HSA. The IRS uses the numbers for identification purposes and to help verify the accuracy of your tax return. The IRS may also provide this information to the Department of Justice for civil and criminal litigation, and to cities, states, the District of Columbia, and U.S. possessions to carry out their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You must provide your TIN whether or not you are required to file a tax return. Payers must generally withhold 28% of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to a payer. Certain penalties may also apply.