| | | Cash-Rel | eased X | Chang | e Imageo | l Docume | nt Che | cklist | | |
|------------|---|---------------|-------------|------------|---------------|--------------------|------------------------|------------|----------------|---------------------------------------|
| Borrowe | r Name: Jason C | omer | | Proper | ty Address | : 3101 N 56 | S th St, Pl | noenix A | Z 85018 | |
| Seller Na | ame Neighborho | od Loans | | 1 | Fred | die Mac Sel | ler Numl | per 21 | 6924 | |
| | Contact Name | | | | | | | | | |
| | Email address jga | | iahborhoodl | nans com | 1 | | x Numbe | | | |
| | ac Investor Contract lo | | Freddie Mad | | | Seller Loan I | | | Freddie Mac | Settlement |
| | 77658 | defitifier # | 007190 | | | 21020069 | | | Date 06/25/2 | |
| Lot | Block | Subdivision |) | | Borrower (| Closing Date | | Servicer | Loan # (if ava | ilable) |
| | | | | | | | | | | · · · · · · · · · · · · · · · · · · · |
| Required | Document Nam | ne (Docume | ents That A | re Not O | riginals Mu | st Be Certif | ied True | Copy) | | X=Attached or N/A |
| Yes | Fully Executed Freddie Mac Loan Selling Advisor Document Checklist | | | | | | X | | | |
| Yes | Freddie Mac Loan Selling Advisor Funding Details Report (Final) | | | | | | X | | | |
| Yes | Flood Certification Evidencing Life of Loan Coverage, Flood Zone and Proof of Transfer | | | | | | | X | | |
| Yes | | | | | | | | | | X |
| | Tax Information Sheet (Contains Tax ID#S, Tax Authorities Name & Address, Date Last Paid, Next Due Date). If New Jersey Property, include Tax Certificate | | | | | | | | | |
| Yes | Signed Closing | | | | | | | | | X |
| Yes | Escrow Disclosu | ure Stateme | ent /Escrow | / Instruct | ions/Signe | d Escrow W | aiver No | tification | evidencing | Х |
| | Escrow Disclosure Statement /Escrow Instructions/Signed Escrow Waiver Notification evidencing items to be waived | | | | | | | | | |
| Yes | IRS W-9 Eviden | | | | ity Number | s | | | | Х |
| Yes | Copy of Note, R | | | | | | | | | Х |
| Yes | NY Property – a | II documen | tation requ | ired for N | NY CEMA | | | | | N/a |
| Yes | Copy of Mortgage (Deed of Trust), Applicable Riders And Legal Description | | | | | | | X | | |
| Yes | Manufactured Housing Real Property Certificate Documents (or assigned COT with proper UCCs) | | | | | | | X | | |
| Yes | Copy of Assignment to Servicer or verification of MERS Successful Transfer of Servicer | | | | | | | X | | |
| Yes | PMI Certificate and Endorsements, if applicable | | | | | | | X | | |
| Yes | Form 1008/1077 Uniform Underwriting and Transmittal Summary | | | | | | | X | | |
| Yes | Initial Loan Application(s) Signed By All Borrowers (FHLMC 1003) | | | | | | | X | | |
| Yes | Final Loan Application(s) Signed By All Borrowers (FHLMC 1003) | | | | | | | X | | |
| Yes | Complete appraisal documentation as per underwriting/approval guidelines | | | | | | | X | | |
| Yes | Mailing Address Certification (If Borrower's billing address is different from the property address) | | | | | | X | | | |
| Yes | Legal Description (Copy) | | | | | | X | | | |
| Yes | Ground Rents/Lease Agreement | | | | | | X | | | |
| Yes | Signed Homeowners Authorization Letter (NJ, NY & IL Only) | | | | | | n/a | | | |
| Yes | Homeowner Option Letter (WI & MD Only) | | | | | | n/a | | | |
| Yes | Hazard Insurance Policy and/or Other Insurance Policies (Including Certificate of Insurance) and Endorsement Change Letter | | | | | | | X | | |
| Voo | | | | o with M | I/DMI | | | | | <u></u> |
| Yes | PMI Disclosure for Conventional Loans with MI/PMI | | | | | | X | | | |
| Yes Yes | Copy of Buydown Agreement | | | | | | | X | | |
| Yes | First Payment Letter Borrower Payment History (required for seasoned loans, loans with interest credit or where UPB was amortized | | | | | | | X | | |
| 162 | down) payment histo | | | | | | | | amortize0 | ^ |
| Yes | Rural Housing L | | | | | | | rr/ | | X |
| Yes | Title Policy Com | | | | | | | | | X |
| Yes | Borrower's Goo | | ı | | | | | | | Х |
| Yes | | | | etters (H | azard, Flood, | PMI, Tax, Etc. |) | | | Х |
| Yes | All Applicable Loan Sale Notification Letters (Hazard, Flood, PMI, Tax, Etc.) Credit Report And Evidence of Borrower Credit Score | | | | | | | Х | | |
| Yes | Signed Final Clo | sing Disclo | sure | | | | | | | Х |
| Yes | Power of Attorne | | | | | | | | | Х |
| Yes | Executed USA F | Patriot Act N | Notice to A | oplicants | | | | | | Х |
| Yes | Name Affidavit | | | | | | | | | Х |
| Yes | Final LP Underv | vriting Findi | ngs Along | with Loa | n Product / | Advisor Key | & Trans | action Nu | ımber | Х |
| Yes | Final Underwriti | ng Approva | I If Non Lo | an Prodเ | ıct Advisor | Loan | | <u> </u> | | Х |
| Yes | All Conditions of | | | | anually under | written) | | | - | Х |
| Yes | Signed Right of | | | | | <u> </u> | | | | Х |
| Yes | Loan Estimate | | | | | it Form and | other a | oplicable | disclosure | Х |
| | statements sign | ed by borro | wer at loar | n applica | tion | | | | | |

Chapter 11: Checklists and Forms

Yes All Remaining Credit Documents: VOE, Pay stubs, W-2 Statements, Tax Returns, 4506T, X VOD, Bank Statements, Divorce Decree, Lease Agreements, Etc.

Exhibit 28A, 6.3:

Servicer shall be entitled to charge Seller a fee ("Late Document Fee") equal to \$100.00 per Loan per month on those Loans for which all original final documents specified in the Final Documents section of the Servicing Transfer Instructions have not been delivered to Servicer or the Designated Custodian within six (6) months of the Sale Date. Such Late Document Fee shall begin to accrue on the first day of the seventh (7th) month after the Sale Date. Notwithstanding the foregoing, Servicer shall not impose a Late Document Fee if Seller's failure to deliver an original Loan document is caused by the failure of the applicable recording office to record and return an original Loan document, provided Seller, in Servicer's reasonable judgment, has exercised and continues to exercise reasonable good faith effort to fulfill its obligation hereunder.

DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency

STANDARD FLOOD HAZARD DETERMINATION FORM (SFHDF)

OMB Control No. 1660-0040 Expires: 10/31/18

| | | SECTION I - LOAI | N INFORMATI | ION | | | | | |
|---|---|---|--------------------|----------------|----------|------------------------------------|--|--------------------|----|
| 1. LENDER/SERVICER NAME | | 2. COLLATERAL DESCRIPTION (Building/Mobile Home/Property) (See instructions for | | | | | | | |
| Customer Number 1000162537 | | more information.) Borrower: COMER, JASON | | | | | | | |
| Address | | Determination Addr | ess: | | | | | | |
| NEIGHBORHOOD LOANS INC ISAOA/ATIMA | | 3101 N 56TH ST PHOENIX, AZ 850 | 18-6605 | | | | | | |
| 1333 BUTTERFIELD RD SUITE | | MARICOPA COUN | | | | | | | |
| DOWNERS GROVE, IL 60515-37 | 778 | APN/Tax ID: | | | | Lot: | | Block: | |
| Delivery Method: FDR-COM - WE | S/D: Section: | Tow | Township: | | | Phase: Range: | | | |
| | | 1000 | | | | T OF FLOOD INSURANCE REQUIRED | | | |
| 3. LENDERVOERVIOLIVID# | 4. LOAN IDENTIF | 2102006994 | | | J. AIVI | OON OF | LOOD INSC | SIVANOL INLIGORY | |
| l l | | SECT | ION II | | | | | | |
| A. NATIONAL FLOOD INSURA | ANCE PROGRAM | I (NFIP) COMMUNITY | JURISDICTION | N | | | | | |
| 1. NFIP Community Name | | 2. County(ies) | | 3. State 4. NF | | 4. NFIP Co | FIP Community Number | | |
| PHOENIX, CITY C | | MARICOPA COU | I | AZ | | | 040051 | | |
| B. NATIONAL FLOOD INSURA | ANCE PROGRAM | I (NFIP) DATA AFFECT | ING BUILDIN | G/MO | BILE | HOME | | | |
| 1. NFIP Map Number or Comm | unity-Panel Numb | er 2. NFIP Map Pane | el Effective / | 3. | Is there | e a Letter of | Map Chang | je (LOMC)? | |
| (Community name, if not the sa | | Revised Date | | | NO | | | | |
| 04013C2230M | | September 18, 20 | September 18, 2020 | | | | | | |
| 4. Flood Zone | | 5. No NFIP Map | | | | | es, and LOMC date/no. is available, | | |
| × | | | 1 | Date: | | | er date and case no. below). Case Number: | | |
| C. FEDERAL FLOOD INSURANCE AVAILABILITY (Check all that apply.) | | | | | | | | | |
| 1. X Federal Flood Insurance | e is available (com | munity participates in th | e NFIP). | Reg | ular Pr | rogram 🗌 | Emergenc | y Program of NFIF | , |
| 2. Federal Flood Insurance | e is not available (| community does not par | ticipate in the I | NFIP) | | | | | |
| 3. Building/Mobile Home is may not be available. | in a Coastal Barr | er Resources Area (CB | RA) or Otherw | ise Pr | otecte | d Area (OPA | A). Federal F | Flood Insurance | |
| CBRA/OPA Designation | Date: | | | | | | | | |
| D. DETERMINATION | | | | | | | | | |
| IS BUILDING/MOBILE HOME | IN SPECIAL FLO | OD HAZARD AREA (ZO | ONES CONTA | INING | THE | LETTERS " | A" OR "V") | ? YES X N | О |
| If yes, flood insurance is require If no, flood insurance is not require not removed. | | | | se not | e, the | risk of floodii | ng in this ar | ea is only reduced | , |
| This determination is based on | examining the NF | IP map, any Federal En | nergency Mana | ageme | ent Age | ency revision | ns to it, and | any other | |
| information needed to locate the | e building /mobile | home on the NFIP map | | | | | | | |
| E. COMMENTS (Optional) | | | | | | | HMDA | Information | |
| SEE PRELIMINARY TITLE REPOR | RT | | | | | | State: | 04 | |
| | | | | | | | County: MSA/MD: | 013 38060 | |
| | | | | | | | CT: | 1111.00 | |
| | | | | | | | | 04013111100 | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| LIFE OF LOAN DETERMINATION This flood determination is prov | | use and honofit of the | ontity named i | n Soc | tion 1 | Boy 1 in ord | or to comply | with the 1001 | |
| Reform Act and may not be use to purchase a property or deter | ed or relied upon l mining the value | by any other entity or inc | | | | | | | er |
| F. PREPARER'S INFORMATION | | than than Landan' | | | | | DATE OF | DETERMINIATION | |
| NAME, ADDRESS, TELEPHOI | • | , | | | | DATE OF DETERMINATION May 24, 2021 | | | |
| | | viceLink National Floo E. Border St | a | | | | l IV | iay 24, 2021 | |
| Service | Link Thi | rd Floor | | Pho | ne: 1. | 800.833.6347 | ORI | DER NUMBER | |
| | Arli | ngton TV 76010 | | | | 800 662 6347 | 1 | 1421670605 | |

Arlington, TX 76010

Fax: 1.800.662.6347

GEICO Insurance Agency, LLC

Issued by HOMESITE INSURANCE COMPANY P.O. Box 5300
Binghamton, NY 13902-9953
Tel. (866) 372-8903 Fax (877) 273-2984

Insured Name and Mailing Address:

JASON COMER EMILY BURKETT 3101 N 56th St Phoenix, AZ 85018-6605

Evidence of Insurance For Policy Number 38162242

This policy covers the listed location(s) from: 12:01 AM June 17, 2021 through 12:01 AM June 17, 2022 (local time)

Send payment to: PO Box 414356 Boston, MA 02241-4356

Insured Location

3101 N 56th St Phoenix AZ 85018-6605

Residence: Primary home

Deductible: \$2500

Wind/Hail Deductible: \$2500

| Coverage | Limit | |
|--|-----------|-----------|
| Section I - Property | | |
| A. Dwelling | \$235,000 | |
| B. Other Structures | \$23,500 | |
| C. Personal Property | \$117,500 | |
| D. Loss of Use | \$70,500 | |
| Section II - Liability | | |
| E. Personal Liability | \$300,000 | |
| F. Medical Payments to Others | \$1,000 | |
| Total Policy Premium | | \$1490.00 |
| Total Amount Due | | \$1490.00 |
| Total Amount Paid *Please note that installment fees are not include | *\$0.00 | |

First Mortgagee

Loan Number: 2102006997 NEIGHBORHOOD LOANS 1333 BUTTERFIELD RD STE 600 DOWNERS GR, IL 85297-

Notes:

H03 – Homeowners

HO 04 20 - Specified Additional Amount Insurance for Cov A limit 50%

The Coverage A Dwelling amount is based on replacement cost as described in the policy. Certain exceptions apply. Please review your policy for further details.

All information and representations herein are subject to the policy terms and conditions. Coverage is contingent upon receipt of the initial payment of premium prior to the effective date of the policy.

HH D1 06 CW 11 14 Page 1 of 2

of more - nex

Authorized Representative

Date June 15, 2021

This evidence of property insurance is issued as a matter of information only and confers no rights upon the certificate holder. This evidence of property insurance does not amend, extend or alter the coverage afforded by the policy above.

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