

Please complete the following three forms and submit them to [BrokerApproval@commercemtg.com](mailto:BrokerApproval@commercemtg.com)

1. Branch Application Form
2. Mortgage Broker Compensation Request
3. Web Center Form

## BRANCH APPLICATION

Company Information			
Legal Name of Entity :			
Doing Business As :			
Street Address (No P.O. Box) :			
City:		State:	ZIP Code:
Phone:	Fax:	Company E-mail:	
Federal ID No:		If no Federal ID #., Broker SSN:	
President / Owner:		Broker of Record:	
License/Approval			
Branch Name:			
Street Address (No P.O. Box) :			
City:		State:	ZIP Code:
Phone:	Fax:	Branch E-mail:	
Federal ID No:		If no Federal ID #., Broker SSN:	
Branch Manager:		SSN:	
Certifications			
The undersigned hereby agree to be the master broker agreement and incorporate this branch application as part of the original application and agreement.			

\_\_\_\_\_  
 Signature Date

\_\_\_\_\_  
 Signature Date

\_\_\_\_\_  
 Broker (Company) of Record (Print)

\_\_\_\_\_  
 President / Owner (Print)

\_\_\_\_\_  
 Signature Date

\_\_\_\_\_  
 Branch Manager (Print)

## MORTGAGE BROKER COMPENSATION REQUEST

Broker Company: \_\_\_\_\_

Broker of Record: \_\_\_\_\_

Effective Date: \_\_\_\_\_

Account Executive: \_\_\_\_\_

We hereby request that our Lender-Paid Compensation Agreement be CHANGED to reflect the following update:

LENDER - PAID COMPENSATION PERCENTAGE			
CHM TPO LENDER PAID COMPENSATION %	SELECT PLAN	CHM TPO LENDER PAID COMPENSATION %	SELECT PLAN
Plan 1.00% - Compensation Percentage		Plan 2.00% - Compensation Percentage	
Plan 1.125% - Compensation Percentage		Plan 2.125% - Compensation Percentage	
Plan 1.25% - Compensation Percentage		Plan 2.25% - Compensation Percentage	
Plan 1.375% - Compensation Percentage		Plan 2.375% - Compensation Percentage	
Plan 1.50% - Compensation Percentage		Plan 2.50% - Compensation Percentage	
Plan 1.625% - Compensation Percentage			
Plan 1.75% - Compensation Percentage			
Plan 1.875% - Compensation Percentage			

By submitting this form, you are warranting and represent that:

1. You are authorized to make this compensation selection for the above-named Broker
2. Your company has an existing compensation plan that is compliant with all aspects of the Amendment of Section 226.36 of Regulation Z (the 'Rule'), including how all loan offices are required to receive compensation.

Broker Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

