



THE CONSTRUCTION LOAN COMPANY, INC.

"In Affiliation with Member Home Lending Services, Inc." www.loantobuild.com

COMPANY INFORMATION:

Customer's Name: (if credit will be in the name of Builder's Customer): _____

Company Legal Name: (please print or type) _____

Address: _____ State: _____ Zip: _____

Office Telephone: () _____ Fax: () _____ Cell Phone: () _____

Date Established: _____ Email: _____

State Contractor's License #: _____ Fed Tax ID#: _____ Years in Business: _____

Business type: { } Corporation { } Partnership { } Proprietorship { } Individual

LIST ALL INDIVIDUALS WHO OWN 10% OR MORE OF COMPANY (use separate application for additional owners)

Owner(s) - Full Legal Name	Title	Social Security #	Percent of Ownership	Married	Single	Separate
1) _____ / _____	_____	_____ - _____ - _____	_____ %	_____	_____	_____
2) _____ / _____	_____	_____ - _____ - _____	_____ %	_____	_____	_____

If in business under a different name in the last 5 years, please indicate: _____

LIST ALL AFFILIATED BUSINESSES (REAL ESTATE INVESTMENT GROUPS, TITLE CO., APPRAISERS/INSPECTOR, MORTGAGE BROKER, MORTGAGE COMPANY, SURVEYOR. (use separate application for additional companies/owners). Submit documentation of all affiliated Companies/Agreements with Registration Form. Please put N/A if there are none.

Company Name	Type of Business	Owner(s) - Full Legal Name	Ownership	Yrs. In Business
_____	_____	_____	_____ %	_____
_____	_____	_____	_____ %	_____
_____	_____	_____	_____ %	_____

BUILDER RESIDENTIAL PROFESSIONAL EXPERIENCE SUMMARY: (include homes built from start to finish as a general contractor)

Year	Gross Sales	Total Units Built	% of Spec	% Pre-Sale Builder own land during construction	% Contract Customer own land during construction	% Property Type				
						Custom	Spec	Modular	Renovation	Mfg.
2008	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
2007	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
2006	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____

If you have a Builder Line-of-Credit, this Line-of-Credit is used _____% of the time to complete residential construction projects.

Please list all Lines-of-Credit you currently have, including the maximum dollar amount to the Line, name of lender & account #.

\$ _____ Lender Name: _____ Account #: _____

\$ _____ Lender Name: _____ Account #: _____

INSURANCE:

General Liability Insurance Carrier? _____ Phone: _____

Agent: _____ Policy #: _____ Expiration Date: _____ Coverage Amt: \$ _____

Worker's Compensation & Employers' Liability Carrier: _____ Amount: \$ _____

Describe other insurance(s) or bonds: _____

PLEASE ANSWER THE FOLLOWING QUESTIONS:

Have you, the company or any of the principals, declared Bankruptcy within the last 10 years? _____ YES _____ NO

Are you, the company or any of the principals, currently a Defendant in any Suits or Legal Actions? _____ YES _____ NO

Do you, the company or any of the principals, have any outstanding judgments against them? _____ YES _____ NO

Do you, the company or any principals, have unpaid Federal or State Income Taxes for the current or past years? _____ YES _____ NO

Have you, the company or any of the principals, ever had your General Contractor's License revoked or suspended? _____ YES _____ NO

IF YOU HAVE ANSWERED YES TO ANY OF THE ABOVE QUESTIONS, PLEASE ATTACH A LETTER OF EXPLANATION

REFERENCE INFORMATION:

Title Company: _____

Phone: _____ Fax: _____

Address: _____

Contact: _____

Lender: _____

Type of Loan: _____

Address: _____

Phone: _____ Fax: _____

Lender use only: Sold since _____ Hi Credit _____

Rating _____ Current Balance _____

Comments: _____ Confirmed by: _____

Supplier/ Subcontractor Name: _____

Type: _____

Contact Name: _____

Phone: _____

Address: _____

Fax: _____

Lender use only: Sold since _____ Hi Credit _____

Rating _____ Current Balance _____

Comments: _____ Confirmed by: _____

Supplier/ Subcontractor Name: _____

Type: _____

Contact Name: _____

Phone: _____

Address: _____

Fax: _____

Lender use only: Sold since _____ Hi Credit _____

Rating _____ Current Balance _____

Comments: _____ Confirmed by: _____

Lumber Company Name: _____

Type: _____

Contact Name: _____

Phone: _____

Address: _____

Fax: _____

Lender use only: Sold since _____ Hi Credit _____

Rating _____ Current Balance _____

Comments: _____ Confirmed by: _____

Financial Institution Name: _____

Contact Name: _____

Address: _____

Phone: _____

Estimated Volume Financed: \$ _____

Fax: _____

Lender use only: Sold since _____ Hi Credit _____

Rating _____ Current Balance _____

Comments: _____ Confirmed by: _____

Financial Institution Name: _____

Contact Name: _____

Address: _____

Phone: _____

Estimated Volume Financed: \$ _____

Fax: _____

Lender use only: Sold since _____ Hi Credit _____

Rating _____ Current Balance _____

Comments: _____ Confirmed by: _____

Please submit the following documentation along with this completed Registration Form:

- 1. A complete Sworn Statement & Specifications for the proposed project.**
- 2. Final Plans (mini print/plans, 8 1/2 x 11 dimensions) signed and dated by Builder and Borrower.**
- 3. Copy of State Builder License or Registration.**
- 4. Copy of Occupational or Business License.**
- 5. Copy of Declarations Page: Worker's Compensation Insurance & General Liability Insurance**
- 6. Bonding Information (if applicable for your state)**
- 7. Documentation on any "affiliated" business arrangements/ownership/affiliations**
- 8. Copy of Principal(s) Resume**
- 9. Copy of Articles of Incorporation**
- 10. Copy of last two years of business tax returns (for business) or personal tax return (for sole proprietor).**

ALL PRINCIPAL OFFICERS - PLEASE SIGN AND DATE

ACKNOWLEDGMENT: By signing below all Principals acknowledge that they have disclosed any business arrangements, ownership, or affiliation with any Real Estate Investment Programs, Real Estate Companies, Mortgage Brokers, Mortgage Companies, Appraisers/Inspectors, Title Companies, Surveyors or the Lender. **CERTIFICATION:** All information contained and disclosed in this Registration is hereby certified to be true and accurate and may be enforced by applicable State law.

Dated this _____ day of _____ 20_____

Principal Signature

Date

Principal Signature

Date

_____ being duly sworn deposes and says that he/she is the _____ of _____ contractor(s), and that answers to the foregoing questions, and all statements contained therein, are true and correct and made solely for the purposes of providing the Lender with professional information. Verification may be obtained from any source in this document. You are required to keep the Lender apprised of any changes to your organization or it's structure. The original will remain with the Lender even if such information will not accomplish the procurement of construction financing.

Subscribed and sworn before me this _____ day of _____ 20 _____

Notary Public

County of _____ State of _____

My commission expires _____

For lender office use only:

Credit Check: _____ Date _____ Comments _____ Confirmed by _____ Credit Rating _____

BBB: _____ Date _____ Comments _____ Confirmed by _____

License Check: _____ Date _____ Comments _____ Confirmed by _____



updated 10-08

The Construction Loan Company, Inc.
"In affiliation with Member Home Lending Services, Inc."

205 N Walnut, Howell, MI 48843
(517) 552-7235 Office
(517) 552-7243 Fax



THE CONSTRUCTION LOAN COMPANY, INC.

205 N Walnut, Howell, MI 48843

517-552-7235 Office

517-552-7243 Fax

GENERAL AUTHORIZATION LETTER

To Whom It May Concern:

I have applied to The Construction Loan Company, Inc./Member Home Lending Services, Inc. (CLC/MHLS) for registration as a participating licensed residential builder and hereby authorize you to release requested information, which may include information deemed necessary in connection with a consumer credit report.

This information is for the confidential use of the lender in determining my credit worthiness as a licensed builder or to confirm information I have supplied.

A fax copy of this authorization may be deemed to be equivalent to the original and may be used as a duplicate original. The original signed form is maintained by CLC/MHLS.

Printed Name

Signature

Date

Address

City State Zip Code



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,

Request for Copy of Tax Return

- ▶ **Do not sign this form unless all applicable lines have been completed. Read the instructions on page 2.**
- ▶ **Request may be rejected if the form is incomplete, illegible, or any required line was blank at the time of signature.**

Tip: You may be able to get your tax return or return information from other sources. If you had your tax return completed by a paid preparer, they should be able to provide you a copy of the return. The IRS can provide a **Tax Return Transcript** for many returns free of charge. The transcript provides most of the line entries from the tax return and usually contains the information that a third party (such as a mortgage company) requires. See **Form 4506-T**, Request for Transcript of Tax Return, or you can call 1-800-829-1040 to order a transcript.

1a Name shown on tax return. If a joint return, enter the name shown first.	1b First social security number on tax return or employer identification number (see instructions)
2a If a joint return, enter spouse's name shown on tax return	2b Second social security number if joint tax return
3 Current name, address (including apt., room, or suite no.), city, state, and ZIP code	
4 Previous address shown on the last return filed if different from line 3	
5 If the tax return is to be mailed to a third party (such as a mortgage company), enter the third party's name, address, and telephone number. The IRS has no control over what the third party does with the tax return.	

Caution: If a third party requires you to complete Form 4506, **do not** sign Form 4506 if lines 6 and 7 are blank.

6 Tax return requested (Form 1040, 1120, 941, etc.) and all attachments as originally submitted to the IRS, including Form(s) W-2, schedules, or amended returns. Copies of Forms 1040, 1040A, and 1040EZ are generally available for 7 years from filing before they are destroyed by law. Other returns may be available for a longer period of time. Enter only one return number. If you need more than one type of return, you must complete another Form 4506. ▶ _____

Note. If the copies must be certified for court or administrative proceedings, check here.

7 Year or period requested. Enter the ending date of the year or period, using the mm/dd/yyyy format. If you are requesting more than eight years or periods, you must attach another Form 4506.

____/____/____	____/____/____	____/____/____	____/____/____
____/____/____	____/____/____	____/____/____	____/____/____

8 Fee. There is a \$39 fee for each return requested. Full payment must be included with your request or it will be rejected. Make your check or money order payable to "United States Treasury." Enter your SSN or EIN and "Form 4506 request" on your check or money order.	
a Cost for each return	\$ 39.00
b Number of returns requested on line 7	
c Total cost. Multiply line 8a by line 8b	\$

9 If we cannot find the tax return, we will refund the fee. If the refund should go to the third party listed on line 5, check here

Signature of taxpayer(s). I declare that I am either the taxpayer whose name is shown on line 1a or 2a, or a person authorized to obtain the tax return requested. If the request applies to a joint return, **either** husband or wife must sign. If signed by a corporate officer, partner, guardian, tax matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute Form 4506 on behalf of the taxpayer.

Sign Here	Signature (see instructions)	Date	Telephone number of taxpayer on line 1a or 2a ()
	Title (if line 1a above is a corporation, partnership, estate, or trust)		
	Spouse's signature	Date	