



## Closing Agent Approval

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Please provide us with the following information on any Closing Agents that you wish to use. *Attach the agent's E&O policy, Surety/Fidelity Bond, and wire instructions, if available.*

Closing Agent Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Contact \_\_\_\_\_

Email \_\_\_\_\_

License # \_\_\_\_\_

Closing Agent Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Contact \_\_\_\_\_

Email \_\_\_\_\_

License # \_\_\_\_\_



## AFFILIATED BUSINESS CLOSING AGENT APPROVAL

If you are requesting approval to use a broker-owned or affiliated Closing Agent, please complete the following and provide a copy of the E & O insurance policy.

Closing Agent Company Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_  
Owner \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_  
License# \_\_\_\_\_

## CONTRACT PROCESSOR AGREEMENT

If you are requesting approval to use a contract processor, please complete the following:

Contract Processor Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_  
\_\_\_\_\_  
Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_  
NMLS# \_\_\_\_\_

\*\*provide a copy of the contract between the broker and processor