

LOAN SUBMISSION CHECKLIST

Important Submission Instructions

LOAN SUBMISSION CHECKLIST (page 2) is a list of the documentation required for submission. Please include a completed LOAN SUBMISSION (page 1) with a FannieMae (FNM) 3.2 file, and send the documentation to the ORVET Loan Program via secured e-mail at: submissions@odva.state.or.us. As an alternative, you may mail the documents to: ORVET Loan Program, 700 Summer Street Northeast, Salem, OR 97301-1285; or fax the required documentation to the ORVET Loan Program at 503-373-2393. NOTE: Please do not send submissions and/or conditions to any other ODVA e-mail address or via unsecured e-mail. Use the Submissions e-mail address only.

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| <input type="checkbox"/> ORVET TRID Application (within 24 hours) | <input type="checkbox"/> Homeownership Counseling Notice |
| <input type="checkbox"/> Itemized Fee Worksheet | <input type="checkbox"/> Acknowledgement of Receipt of Homeownership Counseling Notice |
| <input type="checkbox"/> Signed Intent to Proceed (sent by ODVA) | <input type="checkbox"/> TriMerge Credit Report |
| <input type="checkbox"/> Loan Locked | <input type="checkbox"/> Credit Report Disclosure |
| <input type="checkbox"/> ODVA Eligibility | <input type="checkbox"/> Patriot Act Disclosures |
| <input type="checkbox"/> FNMA 3.2 | <input type="checkbox"/> Social Security Number Verification-SSA-89 |
| <input type="checkbox"/> Broker Submission Form | <input type="checkbox"/> Photo ID, each borrower |
| <input type="checkbox"/> DU Findings, if MI required | <input type="checkbox"/> Paystubs/Award Letters, 30 days most recent |
| <input type="checkbox"/> Typed 1008 | <input type="checkbox"/> W-2s/1099s, 2 years |
| <input type="checkbox"/> Signed 1003 | <input type="checkbox"/> Tax Returns, 2 years |
| <input type="checkbox"/> ODVA Addendum to Residential Loan Application | <input type="checkbox"/> Tax Transcripts, if MI required on the loan |
| <input type="checkbox"/> Borrower's Certification and Authorization | <input type="checkbox"/> Asset Statements, 2 months most current, all pages |
| <input type="checkbox"/> Mortgage Loan Origination Agreement | <input type="checkbox"/> Preliminary Title Report |
| <input type="checkbox"/> Anti-Steering Disclosure | <input type="checkbox"/> Purchase Agreement, legible and fully executed |
| <input type="checkbox"/> Right to Receive Appraisal | <input type="checkbox"/> CCRs (if applicable) |
| <input type="checkbox"/> Appraisal | <input type="checkbox"/> Insurance Binder - see Loss Payee below |
| | <input type="checkbox"/> License Numbers for Realtors, Company, Broker and Escrow |

LOSS PAYABLE CLAUSE

Oregon Department of Veterans' Affairs
Director, His Successors and/or Assigns
Insurance Unit
700 Summer Street Northeast
Salem, OR 97301-1285