

Broker Certification Package Checklist

In order to process your Broker Certification Package in a timely manner, we must receive a package that is accurate and complete with the required attachments included. Prior to submitting your package, please review this checklist. If incomplete, your package will be returned to you and this will delay the process. Please make sure that all documents are legible.

Broker Name: _____

State: OHIO MICHIGAN

The following forms can be downloaded from our website and **MUST** be submitted for registration. Please note that if your company is a corporation, limited liability company, partnership, or limited liability partnership, you must use your EIN (Employee Identification Number) or FIN (Federal Identification Number) in all areas where these forms requests TIN/SSN.

SAMS 1111: Payee Name and Address (*Download from our Website*)

- Fill in boxes 2a-2c if your office will be using the tax id number, boxes 3a and 3b for social security number. If you are an individual/sole proprietor registering with a SSN, your individual name (last, first, middle initial) should go in box 3 and your business name should go in box 9 along with your address.
- Did you complete items 7-16? They should be printed in ink. Only the designated or principal broker for each office can certify.
- Box 8 must contain a STREET address, Not a P.O. Box. Using a P.O. Box address is only acceptable as an alternative address in Box 10.
- Did you complete items 17-20? **The Preparer (this does not have to be the broker) must sign in BLUE ink. Faxed copies are not accepted.**

SAMS 1111-A: Selling Broker Certification (*Download from our Website*)

- Have both signatures areas been signed and dated? **The broker must sign in BLUE ink. Faxed copies are not accepted.**
- If you are exempt from signing the Non-Discrimination agreement, did you include the name of the local board?
- Did you complete the broker information portion?
- Is the broker information the same as disclosed on the SAMS Form 1111? The information must be identical.

W-9: Request for Taxpayer ID Number and Certification (*Download from our Website*)

- Did you complete the top portion in its entirety? Address must match the address listed on SAMS Form 1111 and 1111-A.
- Did you complete Part I? Taxpayer ID must match the one disclosed on SAMS Form 1111 and 1111-A.
- Did the broker sign and date under Part II in **BLUE Ink**? The date must be current.

You Must Also Provide the Following:

- **Copy of current Driver's License.**
- **Copy of Social Security Card, if registering with a social security number.**
- **Copy of Most Current Broker's License-Only one broker per office can be certified and he/she must be the principal or designated broker.**

- **A corporation, associate, officer or branch office license is not acceptable.**
- **The license must display an expiration date and cannot expire within 30 days of submitting the package.**
- **The license number must be legible.**
- **The license number must match the number provided on SAMS Form 1111-A.**

➤ **First Page of a Most Current Telephone Bill, Utility Bill or Bank Statement:**

- **Does the name/address on the bill/statement match the name/address in Box 3 and/or 9 on SAMS Form 1111? Please note that if you are using a P.O. Box mailing address, the street address (appearing in box 8) must appear somewhere on the bill/statement. P.O. Boxes are not acceptable for business address verification.**
- **Is the bank or utility company's name clearly visible on the copy?**
- **Is this your most current bill/statement?**

Checklist: Include this checklist

- **Have you completed the "Broker Name" and "State" sections?**

➤ **Email Address:** _____

Please include your email address. If we have questions regarding your package, it is more expedient to contact you by email.

Mailing Instructions:

- **Mail complete certification package to :**
Chapman Law Firm LPA
Attn: NAID Processing
925 Keynote Circle 2nd Floor
Brooklyn Heights., Ohio 44131

Recertification: Please remember that you must recertify annually and it will be your responsibility to track this date and submit a re-certification package timely to ensure that your bidding privileges are not interrupted.

Please allow 4 to 6 weeks for a NAID number to be issued to you. Thank you for taking the time to ensure that your package is complete and accurate. We look forward to assisting you in future transactions

Single Family Acquired Asset Management System (SAMS)
Payee Name and Address

U.S. Department of Housing and Urban Development
Office of Housing
Federal Housing Commissioner

SAMPLE

Instructions: See instructions on back for required attachments. Send completed form to HUD HOC, Attention: Director, Homeownership Center

I. Type of Application (Items 1a-c)
 1a. New Payee
 1b. Existing Payee
 1c. New NAID to Existing Payee
 (Complete Item Nos. 2 or 3 through 10) (Complete Item Nos. 2 or 3, 4, and any changes) (Complete Item Nos. 2 or 5, 6, 5, 6 and 8)

II. Payee's Information (Items 2 or 5 through 16)
 Enter Either Payee's EIN and Business Name or SSN and Individual Name, NOT BOTH (Items 5-8)
 *SSN information to be processed by IRS under FIM/SSN and name shown in Item 2 or 5, and address shown in Item 8.
 2a. EIN 99-9999999
 2b. Business Name for EIN in 2a. ABC Walter
 2c. Principal Broker's Name (if applicable) Mickey Mouse
 3a. SSN 999-99-9999
 3b. Individual Name for SSN in 3a. (Last, First, MI) Mickey Mouse
 4. Payee's NAID (Existing payee) ABCRL9999
 5. HOC Area Identifier 999
 6. Payee Type(s)
 7. Business Phone Number (Area Code) 999-999-9999

8. Business Address (Include City, State, and Zip Code + 4)
100 East Center Orlando, FL 99999
 9. Name
 10. Address (Include City, State, and Zip Code + 4)
P.O. Box 100 Orlando, FL 99999
 11. Minority-owned? If Yes, check type: Yes No
 Black American (BA) Asian Indian American (AI)
 Asian Pacific American (AP) Native American (NA)
 Hispanic American (HA) Hispanic Jewish American (HJ)
 12. Small Business Owned? Yes No
 13. Women Owned? Yes No
 14. Name of Contact Person Mickey Mouse
 Email mmcwb@disney.com
 Phone (Area Code) 999-999-9999 Fax (Area Code) 999-999-9999
 15. Names of Owners/Principals Mickey Mouse
 16. Family/External Business Relationship to HUD/MHM Contract employees?
 Yes No (If Yes, attach an explanation.)

III. For HUD Use Only (Items 17-20) Do not send any attachments other than form SF-3081 to SAMS Service Contractor.
 The HOC must take whatever measures it deems appropriate to verify that the prospective payee is a legitimate entity prior to approving this form. In addition to the Form SF-3081, the HOC may require the Form 954-722B, No Tax Return Filing/Financial Security Number Assignment, or the IRS Letter 1430 (verifying issuance of an EIN) or any other documents it deems appropriate to maintain sound internal controls over its establishment of payees in SAMS. HOC staff must ALWAYS obtain the Form SF-3081 and must NEVER approve any SAMS payee form until the name/TIN information on both forms matches.

17. Preparer's Signature (M&M Contractor/M&M GTR/M&M GTR/Listing Agent GTR) Mickey Mouse
 18. Title Broker/Owner
 19. Date (mm/dd/yyyy) 01/01/0000
 20. Phone (Area Code) 999-999-9999
 21. Selling Broker's Identification Code
 22. Approved for HOC Area(s)

23. Approver's Signature (HOC Director or Designee)
 24. Reviewer's Signature (Supervisory M&M Contractor/M&M GTR/Listing Agent GTR or Designee)
 25. Title
 26. Date (mm/dd/yyyy)
 27. Phone (Area Code)

28. Date of Approval/Submission to Service Contractor (mm/dd/yyyy)

The information on this HUD use only form is provided for informational purposes only. HUD does not guarantee the accuracy of the information provided on this form. HUD is not responsible for any errors or omissions in this information. HUD is not responsible for any delays or rejections of your eligibility approval.

Privacy Act Statement: The Department of Housing and Urban Development (HUD) is authorized to collect the information on this form by the U.S. Housing Act of 1987, as amended. The Housing and Community Development Act of 1987, 42 U.S.C. 3542, authorizes HUD to collect Social Security Numbers (SSN). The information is used to verify information, IRS identification, identify data collection information, payment verification information as a part of business viability. The SSN is used as a unique identifier. HUD may disclose this information to Federal, State and local agencies when relevant to HUD, criminal, or regulatory investigations and prosecutions. It will not be otherwise disclosed or released outside of HUD, except as required and permitted by law. Providing the SSN is mandatory. Failure to provide this information constitutes a delay or rejection of your eligibility approval.

Single Family Acquired Asset Management System (SAMS) Selling Broker Certification

**U.S. Department of Housing and Urban Development
Office of Housing
Federal Housing Commissioner**

Public reporting burden for this collection of information is estimated to average 12 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

This information enables HUD to record and process financial transactions in its automated Single Family Acquired Asset Management System (SAMS) to dispose of acquired single-family properties. HUD reimburses M & M Contractors for their services in maintaining, marketing, and selling HUD homes, and HUD collects funds associated with the sales of these properties. The information enables HUD to create and maintain sound financial management practices and effective internal controls over the property disposition program. A response is required to obtain or maintain a benefit.

Privacy Act Statement. The Department of Housing & Urban Development (HUD) is authorized to collect the information on this form by the U.S. Housing Act of 1967, as amended. The Housing & Community Development Act of 1987, 42 U.S.C. 5545 authorizes HUD to collect Social Security Numbers (SSN). The information is being used as vendor reference information, minority data collection, payment/transmittance instructions and proof of business viability. The SSN is used as a unique identifier. HUD may disclose this information to Federal, State and local agencies when relevant to civil, criminal, or regulatory investigations and prosecutions. It will not be otherwise disclosed or released outside of HUD, except as required and permitted by law. Providing the SSN is mandatory. Failure to provide the information could result in a delay or rejection of your eligibility approval.

Instructions: Send completed form to local HUD HOC, Attn: Director, REO Division

Earnest Money Deposit

As a condition to participate in HUD's single family REO sales program, I agree to abide by the Department's earnest money policy.

Should HUD instruct me to collect earnest money deposits from prospective buyers, I agree to do so at the time the contract is written and, according to HUD's instructions, deposit such funds either in my escrow account (or client's trust account) or in such other manner as HUD may direct no later than the close of the next banking day; or forward such deposits to HUD with the contract.

I understand that I am fully responsible for any deposit accepted and placed in my escrow account (or client's trust account). I also understand that any deposit accepted and forwarded to HUD with a contract will only be in the form of a cashier's check, certified check, or money order with no termination date or cancellation provision.

Earnest money deposits being held in my escrow account (or client's trust account) shall be accounted for at the sales closing, unless the contract is terminated. I agree to immediately comply with HUD's instructions for the ultimate disposition of each earnest money deposit.

I agree to fully explain to each purchaser, prior to a contract being written, HUD's earnest money forfeiture policy.

Non-Discrimination

The undersigned broker participating in the sales of HUD-owned properties agrees that neither she/he nor her/his sales or rental personnel, employees or others authorized to act for her/him, in violation of Title VIII of the Civil Rights Act of 1968 (the "Fair Housing Act" Title VIII or Public Law 90-284) or Executive Order 11063, will decline to show or will discriminate in the sale or rental of any property now or hereafter listed with her/him.

It is further agreed that the undersigned will: (1) refrain from discrimination on the basis of race, color, creed, religion, sex, national origin, age or handicap in the sale or rental of property; (2) instruct their staffs in the policies of nondiscrimination and all applicable local, State, and Federal fair housing laws; (3) prominently display the Fair Housing Poster in all offices in which sale and rental activity takes place; (4) use the HUD-approved Equal Housing Opportunity logo, slogan, or statement in all advertising in conformance with the Advertising Guidelines for Fair Housing; (5) utilize any available minority media (in addition to other media that is used) when advertising HUD-owned properties; and (6) maintain a nondiscriminatory hiring policy in affirmatively recruiting from both minority and majority groups for staff.

Violation of any of the above provisions shall be subject to debarment procedures set forth in 24 CFR 24.

Broker's Signature (Required) & Date (mm/dd/yyyy)

X Mickey Morse, 9/01/0000

Broker's Signature & Date (mm/dd/yyyy)

X Mickey Morse, 9/01/0000

I am a signatory to a voluntary affirmative marketing agreement between HUD and the local board named:

For this reason, I am exempt from signing the non-discrimination portion of this certification.

Broker's Name (Please print or type)

Mickey Morse

Telephone Number (include area code)

999-999-9999

Broker's License Number

AB1234

HUD/ID#

99-9999999 or 999-99-9999

Company's Name & Mailing Address (include City, State, and Zip Code)

ABC Realty 100 Epcot Center, Orlando FL 99999

For HUD Use Only
NAID

**Request for Taxpayer
 Identification Number and Certification**

Give form to the requester. Do not send to the IRS.

Print or type on page 2.
 See Specific Instructions on page 2.

Name: Mickey Mouse

Business name, if different from above:
ABC Realty

Check appropriate box: Individual Sole proprietor Corporation Partnership Other Exempt from backup withholding

Address (number, street, and apt. or suite no.):
100 EPCOT Center

City, state, and ZIP code:
Orlando, FL 32819

List account number(s) here (optional):
N/A

Requester's name and address (optional):

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. 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 2.

Notes: If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number: 9999999999

OR

Employer identification number: 9999999999

Part II Certification

Under penalties of perjury, I certify that:

- 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
- 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
- I am a U.S. person (including a U.S. resident alien).

Certification instructions. You must check 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: Mickey Mouse Date: 01/10/2003

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.

U.S. person. 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:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued).
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee.

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.

Foreign person. If you are a foreign person, use the appropriate Form W-8 (see Pub. 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the recipient has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement that specifies the following five items:

- The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
- The treaty article addressing the income.
- The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
- The type and amount of income that qualifies for the exemption from tax.
- Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Submitting with TIN/ EIN/ EDN

Your total certification package should include:

- SAMS 1111
- SAMS 1111-A
- W-9
- Copy of Broker's License
- Copy of Recent Utility Bill or Bank Statement
- Copy of Driver's License

Submitting with SSN

Your total certification package should include:

- SAMS 1111
- SAMS 1111-A
- W-9
- Copy of Broker's License
- Copy of Recent Utility Bill or Bank Statement
- Copy of Driver's License
- Copy of Social Security Card