

(Formerly known as AmeriNational Community Services, LLC)

Dear Mortgage Originator,

We would like to take this opportunity to introduce ourselves. We are AmeriNat (*formerly known as AmeriNational Community Services, LLC*), a Sub-Servicer for Connecticut Housing Finance Authority. To facilitate communications between our two companies please provide AmeriNat "New Loan Setup Dept." with a list of personnel at your company to contact for questions relating to the servicing released files.

Below is a list of employees that will be able to help you with any questions or concerns you may have.

EMPLOYEE DIRECTORY & CONTACT LIST

<u>Customer Service</u>: Toll Free: (800) 943-1988 • Fax: (562) 745-1281

Payment Correspondence Address:

AmeriNat P.O. Box 52211 Phoenix, AZ 85072-2211

Loan File Submission Address:

AmeriNat Attention: Loan SetupDept. 217 S. Newton Ave Albert Lea, MN 56007

<u>New Loan Setup Email:</u>

Loansetups@amerinatls.com

Tax and Insurance Email:

taxins@amerinatls.com

Employee Name	Ext.	Position/ Title	Email Address
Kasey Wolters	1316	Setup Supervisor	kwolters@amerinatls.com
Frank Camble	1912	Customer Service Manager	fcamble@amerinatls.com
Customer Service	7920	Group Email	CustomerService@amerinatls.com

(888) 263-7628 • (507) 377- 6030 • 217 S. Newton Avenue, Albert Lea, MN 56007 • <u>www.amerinatls.com</u>

Quality Through Innovation and Experience



Servicing Transfer Guidelines for CHFA Loans

I. SERVICING FILE / DOCUMENTS

A. Loan files must be submitted to AmeriNat <u>within 10 days after purchase</u>. Please deliver files to:

AmeriNat Attention: Loan Setup Dept. 217 S. Newton Ave Albert Lea, MN 56007

B. Required Documentation in loan file: **SEE ATTACHED FILE DOCUMENT ORDER CHECK LIST.**

C. All CHFA first mortgage loans delivered to AmeriNat <u>must include an assignment in the name of</u> <u>the Connecticut Housing Finance Authority</u> (CHFA), 999 West Street, Rocky Hill, CT06067.

II. ESCROW

- A. The AmeriNat Escrow Information Sheet must be completed in its entirety.
- B. The originating lender/seller is responsible for preparing the notification to the insurance company/agent regarding the change of servicer and requesting a change of loss payee endorsement, as well as a new declaration page. The mortgagee clause should read as follows:

Connecticut Housing Finance Authority C/O AmeriNat, Its Successors and/or Assigns, ATIMA PO Box 123 Downey, CA 90241

1. Please forward copies of the mortgagee change letters to AmeriNat.

C. <u>FHA</u>

 An individual HUD form 92080 must be completed. Also, a copy of the screen-print from the FHA Connection showing Mortgage Record Change complete. AmeriNat's HUD MTG ID is # 23422 and CHFA Holder # 06238-09998.

D. <u>USDA/RS (RHS)</u>

- 1. A copy of the LNG should be included in the loan file.
- 2. The originating lender/seller should notify USDA/RD (RHS) of the servicing transfer and include a copy of the transfer notice in the file.
- E. <u>Optional Insurance</u>
 - 1. Please provide a list of all loans that have optional insurance and the insurance company name, type of coverage (life, health, or disability), and whether the coverage is single or joint.
- F. <u>Real Estate Taxes</u>
 - 1. Any bills received after the transfer date must be forwarded to AmeriNat prior to the delinquent date. Any penalties incurred due to the late arrival of servicing packages will be charged back to the originating lender/seller.

III. Customer Service

- A. Any pending research or customer inquiries should be completed prior to the transfer. Any problems outstanding as of transfer should be forwarded with a synopsis of what has been completed, and clearly marked in the file.
- B. All correspondence, insurance renewals/cancellations, customer inquiries, real estate tax bills, etc., received after the transfer date, should be identified with your loan number and forwarded to AmeriNat.



(Formerly known as AmeriNational Community Services, LLC)

LOAN INFORMATION SHEET

Borrower 1	Soc Sec #
Borrower 2	Soc Sec #
Property Address	
Mailing Address	
Home Phone	Work Phone 1
Cell Phone	Work Phone 2
Your Loan #	CHFA Loan #
Original Loan Amount	P & I Payment
Purchase Loan Amount	Escrow Payment
Interest Rate	Escrow Pymt Breakdown
Closing Date	County Tax
Interest Paid Thru Date	City Tax
Maturity Date	Hazard Insurance
Loan Type	Other
(1 - Conventional, 2- VA, 3- FHA, 4 Conventional Insured)	Total Payment
FHA / VA Case #	
Mortgage Ins. Commitment#	

ESCROW INFORMATION SHEET

Borrower/s		Loan #
County Taxes		
County Name		Tax ID #
Address		Monthly Amount
		Paid Thru Date
Telephone #		Annual Tax Amount
		QuarterlyOther
City / Town / Borough Taxes		
County Name		Tax ID #
Address		
		_ Paid Thru Date
Telephone #		Annual Tax Amount
Taxes Paid:Annually	Semi-Annually	QuarterlyOther
School Taxes		
County Name		Tax ID #
Address		Monthly Amount
		_ Paid Thru Date
Telephone #		_ Annual Tax Amount
		Other
	Serni-Annualiy	
Mortgage Insurance		
Name of PMI Company		
Certificate #		Annual Amount Effective Date
FHA Case # One Time MIP Amount		
Date Last Paid		
Hazard Insurance	<u>Attach a Co</u>	opy of Policy
Name of Carrier		Policy Number
Dwelling Coverage Amount		Annual Premium
Effective Dates		Replacement Cost Coverage?
Flood Insurance	<u>Attach a C</u>	opy of Policy
Name of Carrier		Policy Number
Dwelling Coverage Amount		Annual Premium
Effective Dates		

SAMPLE LETTER - HAZARD INSURANCE COMPANY

Date

Name and Address of Insurance Company

Re: Policynumber Effective (Policy start date to policy end date) Name of Insured: Joe Smith Sue Smith 1 Main Street Downtown, MD 12345

The servicing of the above referenced loan has been transferred. Please forward all future renewal billing to the address listed below and issue an endorsement to correct the mortgagee clause to read:

Connecticut Housing Finance Authority C/O AmeriNat Its successors and/or assigns, ATIMA PO Box 123 Downey, CA 90241

Thank you for your immediate attention to this matter.

Sincerely Service Release Administrator

AMERINAT DELIVERY CHECKLIST MOBILE MANUFACTURED HOMES ONLY

	HOMES	ONLY			
Lender Loan Number:		Borrower Name:			
Lender Contact Name :		File Contact Email Address:			
Purchase	Purchase Refinance		File Contact Phone Number:		
	FINAL ORIGINAL DOCUMENTS – Do NOT inclu	ıde in Ioan f	ile. Ship under separate cover to:		
Recorded Security Instrument, including Riders (if applicable)		AmeriNat			
Recorded Assignment		Attn: Loan Setup Department			
Recorded Power of Attorney (if applicable)		217 S. Newton Avenue			
······································		Albert Lea, MN 56007			
	LOAN FILE DELIVERY - Please deliver documen	ts in the pref	erred stacking order listed below.		
	DOCUI	MENTS			
	AmeriNat – Loan Information Sheet		Servicing Transfer Goodbye Letter		
	AmeriNat – Escrow Information Sheet		Initial Escrow Account Disclosure		
	CHFA Commitment Letter		Original Note		
	Assignment (paper)		Mortgage Deed/Riders- Copy		
	Loan Underwriting and Transmittal Summary		Borrower Signature Affidavit		
	Final Signed 1003		W-9		
	Flood Life of Loan Determination – Transferred to AmeriNat		Closing Disclosure		
	Flood Insurance Policy (if applicable) List CHFA c/o AmeriNat as Mortgagee		Initial First Payment Letter		
	Hazard Insurance Policy/Binder - List CHFA c/o AmeriNat as Mortgagee		Conveyance of Title		
	Appraisal		Opinion of Borrower/s Counsel		
	Certificate of Occupancy (New Construction)		Insured Closing Letter (Title Insurance not required)		
	Title Search (Title Insurance not required)		Notice of Right to Cancel (Refinance)		
	Errors and Omissions		Real Estate Tax Bill		
			Current Payoff (Refinance)		
		L	I		

Page 1 of 1