



(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

Customer Service:

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

New Loan SetupEmail:

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 • www.amerinatls.com

Quality Through Innovation and Experience

Servicing Transfer Guidelines for CHFA Loans

I. SERVICING FILE / DOCUMENTS

- A. Loan files must be submitted to AmeriNat **within 10 days after purchase**.
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 must include an assignment in the name of the Connecticut Housing Finance Authority (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. FHA
1. 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. USDA/RS (RHS)
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. Optional Insurance
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. Real Estate Taxes
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.



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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)

FHA / VA Case # _____ Total Payment _____

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 _____

Taxes Paid: _____ Annually _____ Semi-Annually _____ Quarterly _____ Other _____

City / Town / Borough Taxes

County Name _____ Tax ID # _____

Address _____ Monthly Amount _____

_____ Paid Thru Date _____

Telephone # _____ Annual Tax Amount _____

Taxes Paid: _____ Annually _____ Semi-Annually _____ Quarterly _____ Other _____

School Taxes

County Name _____ Tax ID # _____

Address _____ Monthly Amount _____

_____ Paid Thru Date _____

Telephone # _____ Annual Tax Amount _____

Taxes Paid: _____ Annually _____ Semi-Annually _____ Quarterly _____ Other _____

Mortgage Insurance

Name of PMI Company _____ Next Due Date _____

Annual Amount _____

Certificate # _____ Effective Date _____

FHA MIP

FHA Case # _____ Annual Amount _____

One Time MIP Amount _____ Monthly Premium _____

Date Last Paid _____ Next Due Date _____

Hazard Insurance

Attach a Copy of Policy

Name of Carrier _____ Policy Number _____

Dwelling Coverage Amount _____ Annual Premium _____

Effective Dates _____ Replacement Cost Coverage? _____

Flood Insurance

Attach a Copy 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 (Policystart 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**

Lender Loan Number: _____

Borrower Name: _____

Lender Contact Name : _____

File Contact EmailAddress: _____

Purchase _____ Refinance _____

File Contact PhoneNumber: _____

FINAL ORIGINAL DOCUMENTS – Do NOT include in loan file. Ship under separate cover to:			
Recorded Security Instrument, including Riders (if applicable)	<i>AmeriNat</i>		
Recorded Assignment	<i>Attn: Loan Setup Department</i>		
Recorded Power of Attorney (if applicable)	<i>217 S. Newton Avenue</i>		
	<i>Albert Lea, MN 56007</i>		
LOAN FILE DELIVERY - Please deliver documents in the preferred stacking order listed below.			
DOCUMENTS			
<input type="checkbox"/> AmeriNat – Loan Information Sheet	<input type="checkbox"/> Servicing Transfer Goodbye Letter		
<input type="checkbox"/> AmeriNat – Escrow Information Sheet	<input type="checkbox"/> Initial Escrow Account Disclosure		
<input type="checkbox"/> CHFA Commitment Letter	<input type="checkbox"/> Original Note		
<input type="checkbox"/> Assignment (paper)	<input type="checkbox"/> Mortgage Deed/Riders- Copy		
<input type="checkbox"/> Loan Underwriting and Transmittal Summary	<input type="checkbox"/> Borrower Signature Affidavit		
<input type="checkbox"/> Final Signed 1003	<input type="checkbox"/> W-9		
<input type="checkbox"/> Flood Life of Loan Determination – Transferred to AmeriNat	<input type="checkbox"/> Closing Disclosure		
<input type="checkbox"/> Flood Insurance Policy (if applicable) List CHFA c/o AmeriNat as Mortgagee	<input type="checkbox"/> Initial First Payment Letter		
<input type="checkbox"/> Hazard Insurance Policy/Binder - List CHFA c/o AmeriNat as Mortgagee	<input type="checkbox"/> Conveyance of Title		
<input type="checkbox"/> Appraisal	<input type="checkbox"/> Opinion of Borrower/s Counsel		
<input type="checkbox"/> Certificate of Occupancy (New Construction)	<input type="checkbox"/> Notice of Right to Cancel (Refinance)		
<input type="checkbox"/> Title Search (Title Insurance not required)	<input type="checkbox"/> Real Estate Tax Bill		
<input type="checkbox"/> Errors and Omissions	<input type="checkbox"/> Current Payoff (Refinance)		