



# Broker Application: Branch Location

## Instructions

This form is for branch locations only. Please complete this form for each branch location, if multiple locations, and submit along with the detailed and completed Interbank Mortgage Company (“IMC”) broker application package.

Should you have any questions / concerns regarding the application, please contact your IMC representative or call: (847) 239-7272.

### BRANCH INFORMATION

Broker Company IMC Approval Code: \_\_\_\_\_

Branch Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

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

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_ Email: \_\_\_\_\_

### BRANCH MANAGER INFORMATION & RESUME

Any management with an ownership interest must provide their Social Security Number and percent of ownership; please attach resume(s) for each Branch Manager(s).

#### Branch Manager 1

Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_ % of Ownership: \_\_\_\_\_%

Home Address: \_\_\_\_\_

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

#### Branch Manager 2

Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_ % of Ownership: \_\_\_\_\_%

Home Address: \_\_\_\_\_

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

### LICENSED STATES

List all states in which your company is licensed and provide the corresponding license number(s); provide additional information on another sheet, if necessary.

State	License #	State	License #
1. _____	_____	6. _____	_____
2. _____	_____	7. _____	_____
3. _____	_____	8. _____	_____
4. _____	_____	9. _____	_____
5. _____	_____	10. _____	_____

# of states branch approved to do business in: \_\_\_\_\_