



Minnesota Housing Lending Partners
Existing Lending Partner Information

Complete and email to mnhousing.solution@state.mn.us

BRANCH INFORMATION ..... [ ] Add [ ] Change [ ] Delete

Please provide information for each branch office that will take applications under this contract (if applicable). Please supply information in the format provided below. After your organization is granted web access to the programs, your Lending Partner Web Administrator will maintain all branch office information.

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

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

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip +4: \_\_\_\_\_

Phone: \_\_\_\_\_ Ext: \_\_\_\_\_

Fax: \_\_\_\_\_ Toll Free Phone: \_\_\_\_\_

URL: \_\_\_\_\_ Email: \_\_\_\_\_

Program Participation (select all that apply):

- [ ] Start Up (DPL, MPL & DPL Plus initiative) [ ] FUF
[ ] Step Up (Purchase and Refinance) [ ] \*CFUF

\*If picking CFUF, you have to list initiative(s) below:

\_\_\_\_\_

Do you want this office added to our lender lists as taking applications for Minnesota Housing loan programs? [ ] Yes [ ] No

Repeat above information for each additional branch.

Main Office Business Name: \_\_\_\_\_

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

Signature of Web Administrator: \_\_\_\_\_