



GMFS Fee Sheet

Borrower's Name: _____

Correspondent Closing Contact: _____

Phone: _____ Fax: _____

Contact Person: _____

Closing Agent: _____

Phone: _____ Fax: _____

Closing Date: _____ Closing Time: _____

Contact Person: _____

Insurance Company: _____

Phone: _____ Fax: _____

Do you want to escrow for taxes and insurance? _____ YES _____ NO

Do you want an interest credit if allowable? _____ YES _____ NO

Beacon Score: _____

Empirica: _____

Fair Isac: _____

Closing Fees:

_____ (Due / Poc) Appraisal Fee – Payable to: _____

_____ (Due / Poc) Credit Report Fee – Payable to: _____

_____ (Due / Poc) Final Inspection Fee (Escrows for Repairs Requirement) (Fee verified with Appraiser)

_____ (Due / Poc) Correspondent Origination Fee: _____

_____ (Due / Poc) Correspondent Discount Fee: _____

_____ (Due / Poc) Premium Purchase (POC)%: _____

_____ (Due / Poc) Misc: _____ to Correspondent OR: _____

_____ (Due / Poc) Misc: _____ to Correspondent OR: _____

_____ (Due / Poc) Misc: _____ to Correspondent OR: _____

ACKNOWLEDGEMENT

I hereby acknowledge acceptance of the final approval terms as stated above and that the above furnished information is true and accurate to the best of my knowledge. Additionally, I acknowledge that any renegotiation of the above terms and/or fees, subsequent to document preparation, may result in a \$150 redraw fee.

BY: _____ DATE: _____

Correspondent Signature

