HELOC Addendum

WHEREAS: ____ ("Broker"), NMLS ID________, is a RISE TPO approved company that intends to participate in its HELOC program.

THEREFORE:

1. Broker and Mortgage Loan Originators (MLOs) agree that all submitting MLOs are properly licensed in the state in which the subject property of each submitted loan is located.
2. Broker agrees to Broker Compensation of 200 basis points on the initial draw amount on all funded HELOCs.
3. Broker agrees with the following payment schedule:
   a. Loans funded Monday – Friday of a given week will be paid no later than Thursday of the following week.
4. Broker agrees to receipt of payment via ACH.
   a. Please complete and submit the attached ACH form.
5. If the borrower pays off 90% or more of the original loan amount within 16 weeks of the funding date, Broker will be charged an early payoff (EPO) amount equal to total broker comp paid on the loan.
6. NOTE: RISE TPO is not responsible for HELOC credit decisions.

Please Note: Please forward this completed form, the attached ACH form, and attach your current LO roster (including LO names, NMLS numbers and states in which they are licensed) and email all to clients@RISETPO.com.

Printed Name	**Title**
Signature	**Date**

ACH Payment Authorization Form

BROKER ______________________________

NMLS ID ______________________ **TAX ID/SSN** ______________________

Direct payment via Automated Clearing House (ACH) is the transfer of funds from one entity's bank account to another entity's bank account. By completing and returning this form, the above captioned Broker agrees to receipt of compensation from RISE TPO via ACH direct deposit into the bank account described below.

Bank Name ______________________________

Routing # ______________________ **Account #** ______________________

Account Type ☐ Checking ☐ Savings

Broker understands and agrees that this authorization will remain in full force and effect unless Broker notifies RISE TPO, in writing, that said authorization is being revoked. Such notification may be submitted via email to clients@RISETPO.com or by delivery to:

OCMBC, Inc., DBA RISE TPO
19000 MacArthur Blvd., Suite 200
Irvine, CA 92612

Broker may also replace this ACH Payment Authorization Form with revised banking information by completing and submitting a replacement form to RISE TPO in the same manners as stated above.

RISE TPO is authorized to pay this Broker via ACH for transactions for which Broker is due a Broker Fee or Commission.

______________________________ ______________________
Printed Name **Title**

______________________________ ______________________
Signature **Date**