



PREFERRED VENDOR QUESTIONNAIRE

COMPANY INFORMATION (home office)

Company Name:	<input type="text"/>	Ticker Symbol:	<input type="text"/>
Company DBAs:	<input type="text"/>	Company City:	<input type="text"/>
Company Street Address:	<input type="text"/>	Company State:	<input type="text"/>
Company Street Address:	<input type="text"/>	Company ZIP:	<input type="text"/>
Primary Contact Name:	<input type="text"/>		
Primary Contact Phone:	<input type="text"/>		
Primary Contact email:	<input type="text"/>		

QUESTIONNAIRE:

1. Describe Your Company's primary business operation:

2. What products or services are you interested in including in a partnership with TMC? (Including benefits, discounts, marketing fees etc.)

3. Are your current customers primarily mortgage lenders? YES / NO

4. Describe how your company ranks in terms of size and price in its field?

5. How do you charge for your products or services (i.e. units, hourly, set up/sign up costs, etc.)? Please provide an example for each a smaller and larger sized customer or volume with your company. (if applicable)

6. Please provide us with an example of your pricing by product / service / discount to TMC members (attach rate sheet if possible):

PRODUCT OR SERVICE	RETAIL PRICE	PRICE TYPE (i.e. unit, hourly, other)	DISCOUNT TO TMC MEMBERS (discount, volume discount, etc.)	MARKETING / MANAGEMENT FEE TO TMC

7. Would you be willing to pay a marketing fee for TMC to market your company? YES / NO

8. Do you have any existing clients that are also existing members of TMC that you wouldn't be willing to offer discounted pricing/incentive? YES / NO

9. If you routinely provide volume discounts to customers, please provide an example(s) of the discount structure (i.e. price matrix, ect.). Please attach any price matrices or published discounts.

10. Who are your primary executives and managers? Please include contact information.

NAME	POSITION	CONTACT PHONE	CONTACT EMAIL

11. How many FTE's does your company employ?

12. Do you currently or have you previously worked with another mortgage co-op? If so, please explain?

13. Has the company or any affiliated companies ever filed for protection under the federal bankruptcy laws? YES / NO
(If yes, please provide details in an attachment.)

14. Has the firm or firm's principals been subject to any regulatory, criminal, or civil disciplinary issues? YES / NO
(If yes, please provide details in an attachment.)

15. REFERENCES: please include five with contact information, and specify if any are current clients?

NAME / COMPANY	POSITION	CONTACT PHONE	CONTACT EMAIL

16. Who referred you to TMC?

The information provided on this questionnaire shall be reviewed by The Mortgage Collaborative's Advisory Panel, which panel includes lender members of the Collaborative. Upon approval by the Advisory Panel, prospective vendors will be provided a Vendor Agreement for execution.

Thank you for completing the questionnaire. Please email the completed form to:
themortgagecollaborative@mtgcoop.com