



STATE OF MONTANA • DEPARTMENT OF ADMINISTRATION

DIVISION OF BANKING AND FINANCIAL INSTITUTIONS

301 South Park, Suite 316 • PO Box 200546 • Helena, MT 59620-0546

Phone: 406-841-2920 • Fax: 406-841-2930

Website: www.banking.mt.gov • E-Mail: mortgagelicensing@mt.gov

QUARTERLY STATEMENT OF MONTANA MORTGAGE SERVICING ACTIVITY

Engaged in the Business of Servicing Residential Mortgage Loans
Under the Montana Mortgage Act

Q1 data
Due May 15th
For Quarter Jan. 1 – March 31

Q3 data
Due November 14th
For Quarter Jul. 1 – Sept. 30

Q2 data
Due August 14th
For Quarter Apr. 1 – June 30

Q4 data
Due February 14th
For Quarter Oct. 1 – Dec. 31

Each licensee is required by Montana law to submit a statement of its mortgage servicing activities (Ch. 317, L. 2011, Section 34, Mortgage Servicer Duties).

ENSURE THAT THE INFORMATION PROVIDED IS FOR MONTANA RESIDENTIAL MORTGAGE LOANS **ONLY**, NOT A CONSOLIDATION OF ALL THE LOANS SERVICED.

Each entity should file one report which covers all the activity of the entity for the period described.

Important: The report must be filed on or before the 45th day after the end of the calendar quarter. Failure to submit a report on time or in the required format will cause the Department to begin proceedings to initiate an enforcement action against your license, which may include suspension or revocation and a fine.

QUARTERLY STATEMENTS CAN BE SENT BACK TO THE DIVISION BY EMAIL, MAIL, OR FAX.

REGULAR MAIL:
Division of Banking &
Financial Institutions
P.O. Box 200546
Helena, MT 59620-0546

OVERNIGHT MAIL:
Division of Banking &
Financial Institutions
301 South Park, Suite 316
Helena, MT 59601

FAX: 406-841-2930
E-MAIL: mortgagelicensing@mt.gov
PHONE: 406-841-2920

REPORTING ENTITY

(Please Type or Print Legibly)

Name of Licensee _____

Unique Identifier _____

Address of main location _____

Name of person preparing this report _____

Phone number of preparer _____

Fax Number _____

E-mail Address _____

MONTANA LOANS SERVICED DURING QUARTER

	<u>Dollar Volume</u>	<u>Number of Loans</u>
Total Montana Loans Serviced	_____	_____

TYPE OF MONTANA LOANS SERVICED DURING QUARTER

	<u>Dollar Volume</u>	<u>Number of Loans</u>
Conventional	_____	_____
FHA - Insured	_____	_____
VA - Guaranteed	_____	_____
FSA/RHS - Guaranteed	_____	_____
Other	_____	_____

MONTANA LOAN CHARACTERISTICS AS END OF QUARTER

	<u>Dollar Volume</u>	<u>Number of Loans</u>
Report the following information for first mortgages (not including reverse mortgages):		
Government (FHA/VA/USDA) Fixed	_____	_____
Government (FHA/VA/USDA) ARM	_____	_____
Prime Conforming Fixed	_____	_____
Prime Conforming ARM	_____	_____
Prime Non-Conforming Jumbo Fixed	_____	_____
Prime Non-Conforming Jumbo ARM	_____	_____

	<u>Dollar Volume</u>	<u>Number of Loans</u>
Other Fixed	_____	_____
Other ARM	_____	_____
All Second Mortgages	_____	_____
HELOCs	_____	_____
Reverse Mortgages	_____	_____
Other Mortgage Loans	_____	_____
Adjustable mortgages that will adjust in the next quarter	_____	_____
Option ARMs	_____	_____
Negative amortization loans	_____	_____
Property Type:		
1 – 4 Family	_____	_____
Modular	_____	_____
Mobile	_____	_____
Manufactured	_____	_____

MONTANA DELINQUENCY STATUS AS END OF QUARTER

	<u>Dollar Volume</u>	<u>Number of Loans</u>
Less than 30 days delinquent	_____	_____
30 to 60 days delinquent	_____	_____
61 to 90 days delinquent	_____	_____
More than 90 days delinquent	_____	_____

MONTANA LOSS MITIGATION EFFORTS - MODIFICATIONS

	<u>Dollar Volume</u>	<u>Number of Loans</u>
Loan modification applications in process at beginning of quarter	_____	_____
For the quarter, report the following information:		
Loan modification applications received	_____	_____
Loan modifications completed	_____	_____

Loan modifications terminated by borrower	_____	_____
Loan modification applications denied	_____	_____
Loan modification applications terminated by other	_____	_____
Loan modification applications in process at end of quarter	_____	_____

MONTANA DELINQUENCY STATUS AS OF QUARTER END FOR LOANS MODIFIED DURING THE QUARTER

	<u>Dollar Volume</u>	<u>Number of Loans</u>
Less than 30 days delinquent	_____	_____
30 to 60 days delinquent	_____	_____
61 to 90 days delinquent	_____	_____
More than 90 days delinquent	_____	_____

MONTANA DELINQUENCY STATUS AS OF QUARTER END FOR LOANS MODIFIED DURING PRIOR QUARTER

	<u>Dollar Volume</u>	<u>Number of Loans</u>
Less than 30 days delinquent	_____	_____
30 to 60 days delinquent	_____	_____
61 to 90 days delinquent	_____	_____
More than 90 days delinquent	_____	_____

MONTANA FORECLOSURE STATUS

	<u>Dollar Volume</u>	<u>Number of Loans</u>
Loans in foreclosure status as of beginning of quarter	_____	_____
For the quarter report the following information:		
Loans in foreclosure status	_____	_____
Foreclosure resolved other than sheriff sale	_____	_____
Foreclosure resulting in sheriff sale	_____	_____
Number of deeds in lieu of foreclosure accepted	_____	_____
In foreclosure status as of quarter end	_____	_____
REO as of quarter end	_____	_____

AFFIDAVIT

I, _____ the undersigned, being the _____ of _____ swear or affirm that, to the best of my knowledge and belief, the statements contained in this report, including the accompanying schedules and statements, if any, are true and that the same is a true and complete statement in accordance with the law.

Signature

Date

TO BE COMPLETED BY NOTARY:

State of _____)

) ss

County of _____)

On this _____ day of _____, 20_____, before me personally appeared _____, known to me to be the individual described in and who executed the foregoing instrument and acknowledged to me that he/she executed the same.

Signature of Notarial Officer

Name - typed, stamped, or printed

Title and Rank

Residing at

My commission expires: _____

*AFFIX
SEAL
HERE*