

CHL Epic User Access Form



REGION NAME: _____

REGION MANAGER NAME: _____

BRANCH NAME: _____ COST CENTER: _____

BRANCH MANAGER NAME: _____ PHONE: _____

NAME (AS LISTED IN NMLS): _____

TITLE: _____ NMLS #: _____

PHONE: _____ FAX: _____

EMAIL ADDRESS: _____

USER ROLE:

SELECT ONE: LOAN OFFICER LOAN OFFICER ASSISTANT OTHER _____

IF LOA, WHICH LOAN OFFICER(S) DO YOU SUPPORT? _____

In order to receive commissions for any reverse mortgage loans that you originate and fund, your compensation agreement must include a reverse mortgage commission addendum.

Please reach out to your region's commission coordinator to get this setup if needed.

Email completed form to: Ambassador@houseloan.com