



**BISHOP
JACKSON
& KELLY LLC**

ATTORNEYS AT LAW

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RESIDENTIAL LOAN SCHEDULING REQUEST

**ASTORIA FEDERAL MORTGAGE CLOSING INFORMATION FOR RESIDENTIAL CLOSINGS
FAX TO BISHOP, JACKSON & KELLY, LLC 72 HOURS PRIOR TO CLOSING**

For Questions please e-mail:

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Scheduling Fax: 203 549-0464

-----PLEASE REPLY TO STRATFORD OFFICE-----

You may not schedule until this form is fully completed and faxed or e-mailed to us along with the required documentation and we must be in receipt of the clear to close from Astoria. NOTE: BISHOP, JACKSON & KELLY, LLC is not able to determine whether the file is cleared to close and you must contact the loan originator/Broker to determine the status of the loan. If you do not hear from us you must contact this office to confirm your closing date and that all information is received and acceptable to the lender

THIS FORM IS FOR RESIDENTIAL CLOSINGS ONLY. IF THIS IS A COMMERICAL OR MIXED USE LOAN, PLEASE CONTACT BISHOP, JACKSON & KELLY, LLC TO OBTAIN A CLOSING CHECKLIST SPECIFIC TO THE COMMERICAL OR MIXED USE LOANS.

472 Wheelers Farms Road
Third Floor
Milford, CT 06461
Phone: 203-647-3300
Facsimile: 203-647-3333

Station House Square
2505 Main Street, Suite 228
Stratford, CT 06615
203-386-1282
203-386-1795

450 Post Road East
First Floor
Westport, CT 06880
203-682-8290
203-682-8293

www.BJKlaw.us

PLEASE BE ADVISED THAT THIS DATE IS TENTATIVE UNTIL IT IS CONFIRMED BY TELEPHONE OR E-MAIL FROM BISHOP, JACKSON & KELLY, L.L.C.

1. Requested Closing Date: _____ PURCHASE _____ REFINANCE _____

Please do not schedule morning closings. We make every attempt to get the package to you the day before closing but often events beyond our control cause the loan documents to be delivered the morning of the closing. Funds are sent directly from Astoria and will be delivered the morning of the closing by your overnight carrier.

2. Title Insurance:

Borrowers Name _____
(as appears in policy):

Property Address: _____

Prior to closing (3 days): Copy of Proposed Title Policy. POLICY MUST INCLUDE SECONDARY MARKET ENDORSEMENT-AFFIRMATIVE LANGUAGE ENDORSEMENT; SURVEY ENDORSEMENT; ENVIRONMENTAL PROTECTION LIEN ENDORSEMENT; VARIABLE RATE, PUD, CONDOMINIUM ENDORSEMENT (AS APPLICABLE). Please provide Originals with closing loan documents.

ANY EXCEPTION ON SCHEDULE B OF THE TITLE THAT IS NOT ORDINARY AND CUSTOMARY MUST BE BROUGHT TO THE ATTENTION OF BISHOP, JACKSON & KELLY, LLC. PRIOR TO SENDING IT TO US.

Policy to be in the same amount as the mortgage, Mortgage clause as follows: **"Astoria Federal Mortgage Corporation, it successors and/or assigns as their interest may appear"**

Please note that Connecticut General Statute Section 38a-402 limits parties who may act as title agents in the State of Connecticut. If the Settlement agent is not located in Connecticut it will be a requirement of this loan that they provide a Connecticut Settlement agent, a title insurance policy issued by a Connecticut title insurance company and a Connecticut Insured Closing Protection Letter.

3. **Hazard Insurance with paid receipt:**

Insurance Agent: _____

Agent's Address: _____

Amount of Coverage: _____ Annual Premium: _____

Policy No: _____ Policy Term Dates: _____

Insurance Company: _____

Prior to Closing (3 days): Copy of Certificate of Insurance/binder and one year paid receipt required. Amount of minimum coverage must be loan amount or full replacement value. Astoria requires that insurance that will renew or become due and payable within SIXTY (60) days after the date of closing be paid at the time of closing.

MORTGAGEE CLAUSE: "ASTORIA FEDERAL MORTGAGE CORP., AND/OR ITS SUCCESSORS AND/OR ASSIGNS AS THEIR INTEREST MAY APPEAR, P.O. Box 57046, Irvine, CA 92619-7046."

For Condominiums - A Certificate of Insurance containing the mortgagee clause as indicated above for the Condominium Unit on the Condominium's blanket flood insurance policy is required. This Certificate may be obtained from the Condominium Association.

4. **Flood Insurance, with paid receipt (if applicable):**

Insurance in the loan amount (or \$250,000 maximum allowable) with maximum deductible of \$1,000.00.

Insurance Agent: _____

Address: _____

Amount of Coverage: _____ Annual Premium: _____

Policy No: _____ Policy Term Dates: _____

Insurance Company: _____

Prior to Closing (3 days): Copy of Certificate of Insurance/binder and one year paid receipt required. Original must be provided with closing documents.

MORTGAGEE CLAUSE: **"ASTORIA FEDERAL MORTGAGE CORP., AND/OR ITS SUCCESSORS AND/OR ASSIGNS AS THEIR INTEREST MAY APPEAR, P.O. Box 57046, Irvine, CA 92619-7046."**

5. Real Estate Taxes:

Annual (Total) Taxes: \$ _____ Amount due when next paid: \$ _____

Due Dates: _____

Address of Tax Collector: _____

Next Installment Due: _____

Prior to Closing (3 days): Copy of tax bill. Astoria requires that all real estate taxes that will become due and payable within SIXTY (60) days after the date of closing be paid at the time of closing. **IF TAXES ARE NOT ASSESSED YET, BORROWER'S ATTORNEY MUST ESTIMATE THE TAX FOR THE COMING YEAR IN WRITING PRIOR TO CLOSING.**

6. Closing Protection Letter: Please provide a closing protection letter from your title insurance company.

7. Surveys:

Generally, unless specifically itemized as a condition of a loan, Surveys are only required for loans on New Construction.

For New Construction the lender requires:

a) Class A-2 Survey certified to Astoria Federal Mortgage Corporation and/or Astoria Federal Savings and Loan Association, Inc. the title Insurance Company and the borrower. Such survey to show location of all improvements including the well, septic, driveway, easements, encroachments, streams and/or rivers. Copy to be provided prior to closing. Original to be provided with closing loan documents.

b) Copy Certificate of Occupancy and Certificate of Zoning Compliance to be provided prior to closing.

8. HUD-1 Settlement Statements:

To be prepared by borrower's attorney and faxed in advance of closing for review and approval.

9. Cancellation or modification of closing or documents:

If this closing is adjourned or modified after BISHOP, JACKSON & KELLY, L.L.C has prepared the file, then it is Astoria Federal's policy to impose a redraw fee not to exceed \$300.00.

10. Power's of Attorney:

No **Power of Attorney** forms may be used without the Power being first approved by Bishop, Jackson & Kelly, LLC and Power of Attorney may only be used in a limited circumstances which is in the sole discretion of Astoria Federal Mortgage Corporation. Any documents executed with the Power of Attorney must be executed as follows: "Borrower1 by Borrower2, his/her attorney in fact".

11. YOUR LAW FIRM:

ATTORNEY: _____

PARALEGAL: _____

ADDRESS FOR DELIVERY: _____

PHONE: _____

FAX: _____

E-MAIL: _____

If you as a closing attorney/Settlement Agent will be charging a fee you must supply the amount of that fee to Bishop, Jackson & Kelly, LLC prior to the preparation of the closing documents so that the fee may be included in the Truth in Lending calculation. The fee for the settlement agent must be shown on line #1101.

SETTLEMENT AGENT/ATTORNEY FEE FOR LINE 1101: _____

12. Delivery of Package/Funds: Federal Express/UPS/Airborne:

Carrier: _____

Overnight #: _____

Funds will be delivered to the settlement agent, as shown on the insured closing protection letter, by Astoria Bank check with receipt on the day of closing via the overnight carrier designated by the settlement agent.

PLEASE NOTE THAT THIS FILE WILL BE SENT TO YOU BY OVERNIGHT MAIL ON YOUR ACCOUNT NUMBER FOR DELIVERY THE MORNING OF THE CLOSING. BISHOP, JACKSON & KELLY, L.L.C. CANNOT BE RESPONSIBLE FOR ITS TIMELY DELIVERY TO YOUR OFFICE DUE TO THE ERRORS OF THE OVERNIGHT CARRIER OR THE WEATHER. IF IT IS IMPERATIVE THAT THE FILE IS RECEIVED IN A TIMELY FASHION IT IS YOUR OPTION TO HAVE THE FILE PICKED UP AT THIS OFFICE OR YOU MAY ARRANGE FOR A COURIER. PAST EXPERIENCE HAS SHOWN THAT A STOP PAYMENT AND REISSUE OF A BANK CHECK CAN TAKE SEVERAL DAYS AND MAY REQUIRE THE POSTING OF A BOND BY THE RECEIVING ATTORNEY'S OFFICE.