AUTHORIZED HOME EQUITY REVERSE MORTGAGE INFORMATION TECHNOLOGY
FHA Business Partner - P271 HERMIT Applicant Access Request

PRIVACY ACT STATEMENT	Section I

AUTHORITY: Section 203, National Housing Act, Pub. L. 73-479; Section 255, National Housing Act, Pub. L. 100-242; 42 U.S.C. 3543 - Sec. 3543 - Preventing fraud and abuse in Department of Housing and Urban Development programs; U.S. Federal Criminal Code 18 USC 1030 - Fraud and Related Activity with Computers.

PURPOSE: To collect information to establish, monitor or modify system user account; to assign permission based on role assignments for system access; and to ensure positive identity of applicants who signs the form.

ROUTINE USE: To Business Service Providers and their support staff to maintain accountability for user accounts; to support contactors to report security violations and perform account auditing; to FHA business partner in connection with support of a HUD mission; and to law enforcement where criminal violations exist.

DISCLOSURES: Disclosures of this information is voluntary; however, failure to provide the requested information may delay or result in not being able to gain access to Home Equity Reverse Mortgage Information Technology. You will be authorized access by one or more Multi-factor Authentication methods, either account number and password or PIV ID card and PIN or cellular phone and password that is used to tie the account to an authorized user.

* Select One Box: ☐ New User   ☐ Change   ☐ Terminate User   Ticket # _____

USER INFORMATION	Section II

* First Name: _____   * Last Name: _____

** 4 digit Personal Identification Number (PIN): _____

* Job Title: _____

* Lender/Servicer Organization Name: _____

* Office Phone: _____

* Cell Phone # (For Multi-factor Authentication via Text Message): _____

* Office Email Address: _____

* Business Mailing Address: _____

* FHA Mortgagee ID #: _____

* Supervisor's Name: _____

* Supervisor's Office Phone: _____

* Supervisor's Office Email Address: _____

* Must fill in. This information is required to establish or modify your HERMIT user account.
** 4-digit Personal Identification Number (PIN) required. Your PIN will be used to verify your identity when calling the HERMIT Help Desk. To protect your account from unauthorized access, please be sure that you never share your PIN.

APPLICATION ACCESS TYPE (Select One)	Section III

○ Lender Staff   ○ Servicer Staff   ○ Investor GNMA/FNMA

○ Lender Manager   ○ Servicer Manager   ○ Investor Read Only

○ Lender Read Only   ○ Servicer Read Only

Comments _____

Form P271 HERMIT FHA Business Partner (Version 3.3)
Last Updated: 07/18/2022

form HUD 3302 (07/2022)

AUTHORIZED HOME EQUITY REVERSE MORTGAGE INFORMATION TECHNOLOGY
FHA Business Partner - P271 HERMIT Applicant Access Request

RULES OF BEHAVIOR (ROB)	Section IV

ACKNOWLEDGMENT OF RULES OF BEHAVIOR FOR SYSTEM USE
RULES OF BEHAVIOR For P271 Home Equity Reverse Mortgage Information Technology (HERMIT)

The U.S. Department of Housing and Urban Development may grant limited system access to employees, contractors, clients/customers, and program participants who have a need to utilize the Department's automated information resources. Access to the Department's Information Technology resources is for official use only. As a condition of receiving access, you are required to be aware of the Department's system security policies and to abide by these policies. The purpose of these policies is to safeguard the Department's valuable information resources.

The system user identification (USERID) and password issued to you are to be used solely in connection with the performance of your responsibilities in support of the HUD mission and may not be used for personal or private gain. You agree to be responsible for the confidentiality of the assigned information and accountable for all activity with your user identification (USERID). Further, you agree that you will not provide this confidential USERID/password to another user upon leaving the employment of the Department and/or FHA Business Partner. Additional rules of the system follows:
• Log-off the system when leaving the system/workstation area.
• Personal Identity Verification (PIV) cards must be removed when the computer workstation is not in use.
• Refrain from leaving written passwords, Personal Identification Numbers (PINs), and/or other login credentials in the workstation or openly visible area.
• Avoid creating a personal password that can be easily associated with you.
• Ensure Personally Identifiable Information (PII) or Sensitive output or electronic format is secured (locked) in work area.
• Avoid leaving system output reports unattended or unsecured.
• Avoid posting printouts of PII or sensitive output data on bulletin boards.
• Control input documents by returning them to files or forwarding them to the appropriate contact person in your office.
• Avoid violation of the Privacy Act which requires confidentiality of personal data contained in government and contractor data files.
• Report security violations immediately to the HUD Information Technology Services (HITS) National Helpdesk at 1-888-297-8689
• Cooperate in providing personal background information to be used in conducting security background checks required by Federal regulations.
• Respond to any requests for information from either the Government Technical Representative, HUD Headquarters, or management officials regarding system security practices.
• Review the HUD website "Information Security Guide," found under the Office of Information Technology (OIT). (Note: Applicable only to Part II).
• Avoid transporting PII outside of your workplace.
Actions violating any of these rules will result in immediate termination of your assigned USERID/password from the system and constitutes a violation of Title 18, United States Code, Section 1030, and state criminal and civil laws.

CERTIFICATION	Section V

By completing and signing this form, you expressly attest that the information provided is true and complete to the best of your knowledge.

Signature		Date		Printed Name	

SUPERVISOR'S CERTIFICATION	Section VI

By signing this form, you expressly attest that the Infomation provided is true and complete to the best of your knowledge.

Signature		Date		Printed Name	

SUBMISSION INSTRUCTIONS	Section VII

Please scan the signed form and email it to the HERMIT Help Desk at servicingsupport@hermitsp.com.

HELP DESK VALIDATION	Section VIII

☐ Requestor Name			
☐ Supervisor Name	Validated By:	Validation Date	
☐ Supervisor Certification			

form HUD 3302 (07/2022)