

## General Information

Application Date	Year Established	FDIC #	
Name of Applicant (and any servicing subsidiary)			
Property Address			
City		State	Zip
Mailing Address (if different from above)		City	State

## Applicant's Mortgage Portfolio

*Note: "Value" should, where possible, exclude the value of loans secured solely by land  
For the purpose of this insurance, "Mortgage" includes "Home Equity Loans" and "Second Mortgages"*

- Does Applicant's standard Mortgage Agreement require borrowers to procure and maintain insurance in an amount of not less than the amount of Applicant's mortgage interest including, at a minimum, the perils of fire and extend coverage, and in compliance with any commercial policy coinsurance clause? ☐ Yes ☐ No
- Does the Applicant require being named as mortgagee on the mortgagor's insurance policy? ☐ Yes ☐ No
- Does the Applicant require hazard policies for mortgaged properties to be provided by insurance companies with a rating of at least "B" from Am Best's policyholder ratings? ☐ Yes ☐ No
- For loans serviced on the Applicant's behalf by others, does the Applicant require that servicers carry their own E&O insurance? ☐ Yes ☐ No
- What is the average life of the Applicant's recently paid up loans?  Years
- Does the Applicant check that insurance required of the mortgagor is in force at loan closing and annually thereafter? ☐ Yes ☐ No
- Does the Applicant "force place" coverage when necessary?

Hazard Insurance ☐ Yes ☐ No Flood Insurance ☐ Yes ☐ No

Name of Carriers:

Describe the tracking method used:

- Does the Applicant's force-placed program include the "Automatic Coverage Endorsement"? ☐ Yes ☐ No
- Provide the number of foreclosures completed and the number of mortgages outstanding for each of the last three calendar years:

Year	Total Number of Mortgages Outstanding	Number of Foreclosures	Average Balance of Loans Foreclosed
Year ended			
Year ended			
Year ended			

- Over the past 12 months, what was the average length of time prior to sale of foreclosed property?

- Provide average percentage of mortgages that were 90 days or more delinquent over the past 12 months:

- Estimated number and value of loan originations over the next 12 months, broken down as follows:

Type of Loan	Number	Value
Residential (1-4 Family) Mortgages		
Commercial Mortgages		

13. 

Breakdown of all mortgages (including Commercial, Seconds and Home Equity Loans)	Number	Value
(a) Number of mortgages serviced by Applicant for own interest (wholly or part owned):		
(b) Number of mortgages serviced by Applicant for others (no mortgage interest):		
(c) Number of mortgages serviced by others for Applicant's interest (wholly or part owned):		
(d) Total numbers of mortgages both owned & non-owned but serviced (i.e. (a)+(b)+(c)):		

14. Number and value of ALL loans in 13(d) above that are located in:

State	Number	Percentage in 1st Tier Counties	State	Number	Percentage in 1st Tier Counties	State	Number	Percentage in 1st Tier Counties
Alabama			Maine			New York		
Florida			Maryland			North Carolina		
Connecticut			Massachusetts			Rhode Island		
Delaware			Mississippi			South Carolina		
Georgia			New Hampshire			Texas		
Louisiana			New Jersey			Virginia		

Type of Loan	Number	Value
15. Commercial Mortgages only:		
16. 2nd Mortgages & Home Equity Loans:		
17. Mobile Homes only:		
18. Mortgages in excess of \$1,000,000		

19. Provide the outstanding balance of the 5 largest loans:

1.		4.	
2.		5.	
3.			

20. Approximate percentage of serviced loans subject to VA, FHA, SBA or other Mortgage Guarantee Insurance:  %

21. What procedures are followed to give proper notice of delinquency to mortgage guarantors?

22. State approximate percentage number of loans on which Applicant "escrows" for:

Hazard Insurance  %      Life & Disability  %      Real Estate Taxes  %

23. What procedures does the Applicant employ to monitor payment of Real Estate Taxes?

24. If the Applicant services loans for FHLMC, FNMA and/or GNMA provide the following:

	# of loans	UPB
a. Number of loans for FHLMC:	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>
b. Number of loans for FNMA:	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>
c. Number of loans for GNMA:	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>

25. If the Applicant has agreed to undertake custodial services for FHLMC, FNMA and/or GNMA, complete (d), (e) & (f) below:

	# of loans	UPB
a. Number of loans for FHLMC:	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>
b. Number of loans for FNMA:	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>
c. Number of loans for GNMA:	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>

d. Description of the location, fire protection & security provided by Applicant for these files:

e. Details of back-up records in existence in case of loss to the original files:

f. Details of how the Applicant controls & tracks file access, removal & return:

26. If the Applicant requires mortgagors to obtain Title Insurance and/or the equivalent, as appropriate to local practice at loan closing, provide the following:

- a. Percentage of loans on which evidence is required at loan closing:
- b. Description of these requirements:
- c. Description of Applicant’s loan policy provisions with respect to title examinations/searches:
- d. Estimated number of mortgage loans to be made in next 12 months:

Geographic Breakdown of Loans

*Note: Include in the following, those loans in which the Applicant has a mortgage interest (wholly or part owned) only (i.e. loans declared in Applicant’s Mortgage Portfolio Q13 (a) + (c) only)*

Do not include loans owned by other than the Applicant. “Value” should, where possible, exclude the value of loans secured solely by land.

1. Total number of mortgages (wholly or partially owned) numbered in Applicant’s Mortgage Portfolio Q13 (a) + (c):
2. Total value of mortgages (wholly or partially owned) numbered in Applicant’s Mortgage Portfolio Q13 (a) + (c):

Area division of mortgages numbered and valued above:					
States	Number	Value	States	Number	Value
All States (excluding those states listed below)					
North Carolina, South Carolina, Georgia, Florida, Alabama, Mississippi, Louisiana, Texas			Hawaii		
Alaska			Kentucky		
Arkansas			Missouri		
California Counties, including:			Oregon		
San Francisco, San Mateo			Puerto Rico		
Contra Costa, Alameda			Tennessee		
Del Norte, Humboldt, Lake, Marin, Mendocino, Napa, Solano, & Sonoma			Washington		
Monterey, San Benito, Santa Cruz, Santa Clara			Other (please specify)		
Los Angeles					
Orange					
Kern, St. Luis Obispo, Santa Barbara, Ventura					
San Diego					
Alpine, Imperial, Inyo, Mono, Riverside, San Bernadino					
All other counties not included above					

Previous Mortgage Protection Policy

Carrier		Limit of Liability	
Policy Period		Premium	
Deductible		Agent	

## Loss History

1. Has the Applicant been declined for any insurance coverage herein applied for?

☐ Yes ☐ No

If "yes," state circumstances:

2. Has the Applicant suffered any losses during the past 5 years or is the Applicant aware of any circumstances likely to give rise to a loss under any section of the policy?

☐ Yes ☐ No

If "yes," give details:

## Representation Statement

Any person who knowingly and with intent to defraud any insurance company or another person, who files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and subjects the person to criminal and civil penalties. This application becomes a part of the insurance policy if bound. I have read and fully understand the above information, as well as answered the questions to the best of my knowledge.

I/We hereby declare that the above statements and particulars are true, that I/we have not suppressed or misstated any material facts and I/we agree that this Proposal Form shall be the basis of the Contract with Underwriters.

Authorized Signature (Required)

Print Name

Date

**Applicable in AL, AR, DC, LA, MD, NM, RI, and WV:** Any person who knowingly (or willfully)\* presents a false or fraudulent claim for payment of a loss or benefit or knowingly (or willfully)\* presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison. \*Applies in MD Only.

**Applicable in CO:** It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

**Applicable in FL and OK:** Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing false, incomplete, or misleading information is guilty of a felony (of the third degree)\*. \*Applies in FL Only.

**Applicable in KS:** Any person who, knowingly and with intent to defraud, presents, causes to be presented or prepares with knowledge or belief that it will be presented to or by an insurer, purported insurer, broker of any agent thereof, any written statement as part of, on in support of, an application for the issuance of, or the rating of an insurance policy for personal or commercial insurance, or a claim for payment or other benefit pursuant to an insurance policy for commercial or personal insurance which such person knows to contain materially false information concerning any fact material thereto; or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act.

**Applicable in KY, NY, OH and PA:** Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for purpose of misleading, information concerning and fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties (not to exceed five thousand dollars and the state values of the claim for each such violation)\*. \*Applies in NY Only.

**Applicable in ME, TN, VA and WA:** It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties (may)\* include imprisonment, fines and denial of insurance benefits. \*Applies in ME Only.

**Applicable in NJ:** Any person who includes and false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

**Applicable in OR:** Any person who knowingly and with intent to defraud or solicit another to defraud the insurer by submitting an application containing a false statement as to any material fact may be violating state law.

**Applicable in PR:** Any person who knowingly and with the intention of defrauding presents false information in an insurance application, or presents, helps, or causes the presentation of fraudulent claim for the payment of a loss or any other benefit, or presents more than one claim for the same damage or loss, shall incur a felony and, upon conviction, shall be sanctioned for each violation by a fine of not less than five thousand dollars (\$5,000) and not more than ten thousand dollars (\$10,000), or a fixed term of imprisonment for three (3) years, or both penalties. Should aggravating circumstances [be] present, the penalty thus established may be increased to a maximum of five (5) years, if extenuating circumstances are present, it may be reduced to a minimum of two (2) years.