



**MORTGAGE PROTECTION INSURANCE APPLICATION**  
**Loan Protector Insurance Services, Inc.**

**Applicant:** \_\_\_\_\_  
**Mailing Address:** \_\_\_\_\_  
**City, State, Zip Code:** \_\_\_\_\_  
**Telephone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_ **Email:** \_\_\_\_\_  
**Contact:** \_\_\_\_\_ **Proposed Effective Date:** \_\_\_\_\_  
**Years In Business:** \_\_\_\_\_ **Financial Rating:** \_\_\_\_\_

**1. Portfolio Information**

Commercial Mortgage	#	\$	Largest \$
Residential Mortgage	#	\$	Largest \$
Mobile Home	#	\$	Largest \$
Construction/Builders Risk	#	\$	Largest \$
Second Mortgage	#	\$	Largest \$
Home Equity Lines of Credit	#	\$	Largest \$
Commercial REO	#	\$	Largest \$
Residential REO	#	\$	Largest \$

2. Percentage of Conventional Financing: Commercial: \_\_\_\_\_ % Residential: \_\_\_\_\_ %  
 3. Percentage of FHA / VA Financing: Commercial: \_\_\_\_\_ % Residential: \_\_\_\_\_ %  
 4. Percentage Delinquent: Commercial \_\_\_\_\_ % Residential: \_\_\_\_\_ %  
 5. Mortgage Charge Offs Year-to-Date: Commercial: \_\_\_\_\_ Residential: \_\_\_\_\_  
 6. Do you use an automated Loan Tracking Service: Commercial:  Yes  No Residential:  Yes  No  
 7. Do you force placed insurance: Commercial:  Yes  No Residential:  Yes  No  
 8. Commercial Force Placed Properties: # In-Force: \_\_\_\_\_ In-Force Premium: \$ \_\_\_\_\_  
 9. Residential Force Placed Properties: # In-Force: \_\_\_\_\_ In-Force Premium: \$ \_\_\_\_\_  
 10. **Loan Distribution by State:** (Figures shown are:  \$ Outstanding,  # of Loans,  % of Portfolio)

Alabama:	Indiana:	Nebraska:	South Carolina:
Alaska:	Iowa:	Nevada:	South Dakota:
Arizona:	Kansas:	New Hampshire:	Tennessee:
Arkansas:	Kentucky:	New Jersey:	Texas:
California:	Louisiana:	New Mexico:	Utah:
Colorado:	Maine:	New York:	Vermont:
Connecticut:	Maryland:	North Carolina:	Virginia:
Delaware:	Massachusetts:	North Dakota:	Washington:
Florida:	Michigan:	Ohio:	West Virginia:
Georgia:	Minnesota:	Oklahoma:	Wisconsin:
Hawaii:	Mississippi:	Oregon:	Wyoming:
Idaho:	Missouri:	Pennsylvania:	D.C.:
Illinois:	Montana:	Rhode Island:	Other:

**11. Requested Coverages** (check desired coverage. \*Certain coverage may not be available in all jurisdictions)

Force Placed Hazard	Real Estate Owned	Commercial – Broad	Ordinance or Law
Second Mortgage	Builders Risk	Mine Subsidence	Mortgage Legal
Home Equity	Force Place Flood	Demolition Expense	No Coinsurance
Pollution Extraction	Condominium	Mobile Homes	ACV – Roofs
Blanket 1 <sup>st</sup> Mortgage	ACV Commercial	Automatic Coverage	Terrorism
Blanket Vandalism	Blanket 2 <sup>nd</sup> Mortgage	Vandalism Exclusion	Freeze Leakage
REO Contents	Theft of Property	Blanket Home Equity	Blanket Condo

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**12. Limits Requested – Per Property**

Residential	\$	Mobile Homes	\$	Blanket Mortgage	\$
Commercial	\$	Earthquake	\$	Blanket Second	\$
Flood	\$	Terrorism	\$	Boiler & Machinery	\$
Business Income	\$	REO Contents	\$	REO Liability	\$

**13. Deductibles**

Residential/Mobile Home – Fire	\$	Wind/Hail	\$	Vandalism	\$
Commercial Occupied – Fire	\$	Wind/Hail	\$	Vandalism	\$
Commercial Vacant – Fire	\$	Wind/Hail	\$	Vandalism	\$
Flood	\$	Earthquake	\$	Blanket	\$
REO (Commercial & Residential):	\$		\$		\$
Other:	\$		\$		\$

14. Force Placed Coverage Desired?  Annual Certificates  Semi-Annual Certificates  Monthly Reporting Log

**15. Operations / Risk Management**

Foreclosures (last 12 months):	Inspections (Y / N) and Frequency:
Utilize Property Managers? (Y / N)	Is wind pool coverage maintained? (Y / N)
Number of Indirect Loans?:	Number of loans serviced by others?
Unusual Risk:	Coastal Wind Exposures:

**16. Historical Premium & Loss Information:**

Prior Carrier:	Prior Coverage:		
Prior Rate(s):	Prior Deductible(s):		
Annual Premium (last 3 years)	Yr 1: \$	Yr 2: \$	Yr 3: \$
Annual Losses Incurred (last 3 years)	Yr 1: \$	Yr 2: \$	Yr 3: \$
Was prior coverage cancelled/non-renewed (Y / N)	If so, why?:		

**STATUTORY FRAUD WARNING NOTICES:**

**FLORIDA:** Any person who knowingly and with intent to injure, defraud or deceive any insurer files a statement of claim or an application containing any false, incomplete or misleading statement is guilty of a felony of the third degree,  
**KENTUCKY:** Any person who knowingly and with intent to defraud any insurance company or other person files and application for insurance containing 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.  
**PENNSYLVANIA:** 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 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 subject to criminal and civil penalties.  
**OKLAHOMA:** Any person who knowingly and with intent to injure, defraud or deceive any insurer, makes claim for the proceeds of an insurance policy, containing false, incomplete or misleading information is guilty of a felony.

**The undersigned officer declares that to the best of their knowledge, the statements included herein and any documents submitted herewith are true, accurate and complete. The undersigned further agrees that if any information supplied herein or in connection with this application changes between the date of this application and the effective date of the insurance, the undersigned will notify the Company as soon as practicable and the Company may modify any quotations or agreements to provide insurance. Any intentional misrepresentation, concealment or omission of a material fact shall be grounds for cancellation, withdrawal or denial of insurance coverage provided.**

**Representing the Applicant:**

Signature: \_\_\_\_\_  
 Name (print): \_\_\_\_\_  
 Officer Title: \_\_\_\_\_  
 Date: \_\_\_\_\_

**Representing Agent:**

Signature: \_\_\_\_\_  
 Name (print): \_\_\_\_\_  
 Officer Title: \_\_\_\_\_  
 Date: \_\_\_\_\_  
 Agency Name: \_\_\_\_\_  
 Agency Phone Number: \_\_\_\_\_

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