



MORTGAGE PROTECTION INSURANCE APPLICATION

Loan Protector Insurance Services, Inc.

Financial Institution: _____
Mailing Address: _____
City, State, Zip Code: _____
Contact Name: _____ **Email Address:** _____
Telephone: _____ **Fax:** _____ **Proposed Effective Date:** _____
Years In Business: _____ **Financial Rating:** _____

1. Portfolio Information

	Number of Loans		Dollars Outstanding	
	#	\$	Average\$	Largest \$
Residential Mortgages	#	\$	Average\$	Largest \$
Next 12 Months – Residential	#	\$		
Second Mortgages	#	\$	Average\$	Largest \$
Next 12 Months – Seconds	#	\$		
Home Equity Lines of Credit	#	\$	Average\$	Largest \$
Next 12 Months – HELOC	#	\$		
Mobile Homes	#	\$	Average\$	Largest \$
Construction/Builders Risk	#	\$	Average\$	Largest \$
Commercial Mortgages	#	\$	Average\$	Largest \$
Next 12 Months – Commercial	#	\$		
Residential REO	#	\$	Average\$	Largest \$
Commercial REO	#	\$	Average\$	Largest \$

2. Average Mortgage Amount Commercial: \$ _____ Residential: \$ _____
 3. Percent of Financing by Credit Quality: Commercial A: _____ % Residential A: _____ %
 Commercial B: _____ % Residential A: _____ %
 Commercial C: _____ % Residential C: _____ %
 Commercial D: _____ % Residential D: _____ %
 4. Percentage of Conventional Financing: Commercial: _____ % Residential: _____ %
 5. Percentage of FHA / VA Financing: Commercial: _____ % Residential: _____ %
 6. Percentage Delinquent: Commercial: _____ % Residential: _____ %
 7. Foreclosures for Last 12 Months Commercial: _____ Residential: _____
 8. Mortgage Charge Offs Year-to-Date: Commercial: _____ Residential: _____
 9. Do you use an automated Loan Tracking Service? Residential: Yes No Commercial: Yes No
 10. If Yes, Provide Name of Tracking Service Provider: _____

FORCE PLACE HAZARD INSURANCE

11. Do you Force Place (FP) Hazard Insurance? Residential: Yes No Commercial: Yes No
 12. Residential FP Hazard Properties: # In-Force: _____ In-Force Premium: \$ _____
 13. Commercial FP Hazard Properties: # In-Force: _____ In-Force Premium: \$ _____
 14. Current FP Hazard Rates & Deductibles: Residential Rate: _____ Residential Deductible: _____
 Commercial Rate: _____ Commercial Deductible: _____

15. Current Force Place Hazard Carrier: _____

16. Current Force Place Hazard Program 12 Month Loss Ratio: _____

17. Force Placed Coverage Term Desired? Annual Certificates
 Semi-Annual Certificates
 Monthly Logs

18. REQUIRED Historical Premium & Loss Information:

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?		

FORCE PLACE FLOOD INSURANCE

19. Do You Force Place (FP) Flood Insurance: Commercial: Yes No Residential: Yes No

20. Residential FP Flood Properties: # In-Force: _____ In-Force Premium: \$ _____

21. Commercial FP Flood Properties: # In-Force: _____ In-Force Premium: \$ _____

22. Current FP Flood Rates & Deductibles: Residential Rate: _____ Residential Deductible: _____
Commercial Rate: _____ Commercial Deductible: _____

23. Current Force Place Flood Carrier: _____

24. Current Force Place Flood Program Last 12 Month Loss Ratio: _____

25. Flood Determination Provider Name: _____

26. Loan Distribution by State:

# Loans	Balance	# Loans	Balance	# Loans	Balance	# Loans	Balance
AL		IN		NE		SC	
AK		IA		NV		SD	
AZ		KS		NH		TN	
AR		KY		NJ		TX	
CA		LA		NM		UT	
CO		ME		NY		VT	
CT		MD		NC		VA	
DE		MA		ND		WA	
FL		MI		OH		WV	
GA		MN		OK		WI	
HI		MS		OR		WY	
ID		MO		PA		DC	
IL		MT		RI		Otr	

27. Requested Coverages (To be completed with assistance from Loan Protector) **

Forced Order Hazard	REO Hazard	Mine Subsidence	Mortgage Legal
Mobile Homes	Contents	Blanket 1 st Mortgage	Demolition Expense
Condominiums	REO Liability	Blanket 2 nd Mortgage	Pollution Extraction
Terrorism (TRIA)	Equipment Breakdown	Blanket HELOC	ACV Commercial
Builders Risk (COC)	Business Income	Blanket Condominium	ACV Roofs
Contents	Earthquake	Blanket Vandalism	Freeze Leakage
Forced Order Flood	Ordinance & Law	Blanket Theft	No Coinsurance

28. Limits Requested – Per Property (To be completed with assistance from Loan Protector) **

Hazard Residential	\$	REO Liability	\$	Blanket 1 st Mortgage	\$
Mobile Homes	\$	Equipment Breakdown	\$	Blanket 2 nd Mortgage	\$
Hazard Commercial	\$	Business Income	\$	Blanket HELOC	\$
Terrorism (TRIA)	\$	Earthquake	\$	Blanket Condominium	\$
Flood Residential	\$	Ordinance & Law	\$	Blanket Vandalism	\$
Flood Commercial	\$	Mine Subsidence	\$	Blanket Theft	\$

29. Deductibles (To be completed with assistance from Loan Protector) **

Hazard Residential / Mobile Home	\$	Wind/Hail	\$	Vandalism	\$
Hazard Commercial Occupied	\$	Wind/Hail	\$	Vandalism	\$
Hazard Commercial Vacant	\$	Wind/Hail	\$	Vandalism	\$
Terrorism (standalone)	\$				
Flood Residential	\$				
Flood Commercial	\$				
REO Residential / Commercial	\$				
Blanket:	\$				
Blanket:	\$				
Other:	\$				
Other:	\$				

30. 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:

**** Any requested item must be approved by Loan Protector underwriters prior to provision of the service or inclusion in a master policy issued.**

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: _____