

Portfolio Guard[®] Application

Blanket Hazard Insurance - Residential/Commercial

| Proposal Information Sheet | | Note: Internet Explorer is required to use automatic submission feature in browser. All other browsers are not supported & require manual download and return to salessupport@pfic.com | | | | |
|---|--------------------------|---|-----------|---------------------------|------------|----------|
| Application Date | | | | Vendor Number | Client Num | iber |
| Proposed Insured | | | | | Year Esta | ablished |
| Address | | | City | | State | Zip |
| Contact Person Name | Contact Pe | erson Phone | | Contact Person E-mail | | |
| Portfolio Breakout | | | | | | |
| Residential First Mortgages | s Se | econd Mortgages & quity Loans/Lines | Comr | nercial Mortgages | Totals | |
| Number of Loans | + | | + | = | | |
| Outstanding Balance | + | | + | = | | |
| Loan Paper Type (FICO scores shown below) | | Avg. Running Foreclos | sure Rate | Avg. Running Default Rate | | |
| A: % B: % C: % D: % Less than 650+ 620-649 580-619 550-579 Und | n D: % ler 550 | | | | | |

| Properties Known to b | e Uninsured | Properties insured on current force-placed policy | | | |
|-------------------------|---|---|--------------------------------|----------|--|
| Number: | Value: | Number: | Value: | | |
| | ortfolio, are there mortgages on mobile homes t foundation, for which the mobile home and the l | | nanent foundatio Yes | ns No | |
| | r in current portfolio & outstanding balance. ed to permanent foundations (i.e. those sitting on piers | or pillars, and/or tied down | n) are excluded enti | rely. | |
| Do you perform any es | scrow function (tax or insurance) on the loans to | be insured under this po | olicy? Yes | No | |
| Are you a servicer of F | annie Mae or Freddie Mac Ioans? | | Yes | No | |
| | se blocks of loans in the upcoming year? of the proposed acquisition and loan paper quality | | Yes | No | |

Geographic Breakdown

| Provide portfolio information including number of loans and total outstanding balance: | | | | | If yes to Questions 2 or 3, | |
|--|-----|----|----------------------------|-----|-----------------------------|--------------------------------|
| | | | | | | please provide a loan listing |
| 2. Do you lend in first or second tier counties of AL, GA, LA, MS, NC, SC or TX? | Yes | No | 3. Do you lend in Florida? | Yes | No | of all coastal properties with |
| | 100 | | e. Be yea lona in Fienda. | 100 | | this application. |

Insurance Coverage

| Do you verify hazard insurance is in place at loan closing in all cases? | Yes | No |
|--|-----------------|--|
| What system do you usually employ for this verification? | | |
| Does your mortgage agreement require borrowers to procure & maintain compliance with any co-insurance clause in such insurance? | insuranc Yes | e in an amount of not less than the amount of the mortgagee interest & in No |
| Describe procedures for tracking insurance prior to institution of this cov | erage: | |
| Over the past 5 years have you experienced any physical damage losses If yes, provide loss amount, peril (fire, vandalism) and date. Include loss runs from | | |

 Current carrier, policy number & effective dates of policy:

 Type of policy:
 Lender-Placed
 Blanket
 Other

 Have you had any insurance coverage cancelled or non-renewed?

Yes No If yes, provide details.

Coverage, Limits & Deductible Desired

| | Desired Limit (\$250k, \$500k, \$1m, \$2.5, \$5m per occurrence) | Deductible (minimum \$1,000 residential; \$10,000 commercial) | If a coverage section is not desired, please |
|---------------------------------|---|--|---|
| Residential First Mortgages | | | indicate with a "N/A": lower limit and higher |
| Second Mortgages & Equity Loans | | | deductible will result in a lower rate |
| Commercial Mortgages | | | |

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 agree to receive policies, endorsements, invoices and other correspondence via the email address on file with PFI. Updates will be handled during the regular course of business. Requested By:

Authorized Client Signature (Required)

Date

* Optional Coverage / Endorsements Available Upon Underwriter Approval | Note: This is not a Binder. Coverage will not be considered bound unless written confirmation is provided by Proctor Financial, Inc.

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PF PROCTOR

Blanket Hazard Insurance - Residential/Commercial

STATEMENT: 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 KS². 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.