

REO GUARD APPLICATION



Client Number:	Application Date:
Name of Institution:	
Address:	
City, State, Zip code: (If mailing address is different from corporate, include both)	
Contact Person/Title:	
Decision Maker/Title:	
Email:	
Phone:	Fax:

Portfolio Information

Number of loans in portfolio:		Do you provide lending in coastal states?	Yes No
Count of loans by state: (Must be Attached)		If yes, please provide a listing of properties that includes property address and value	
Number of Residential real estate loans:		Number of Commercial real estate loans:	
Current insurance tracking device:		Name of current insurance provider:	
Number of properties to be placed at inception:		Percentage of your business renting &/or refurbishing properties?	%
Last 12 months Premium:	\$	Are you servicing on behalf of others?	Yes No
12 months Claims (please attach 3yr history):	\$	If Yes, what percentage of the investor's business is renting &/or refurbishing properties?	%
Indicate percentage of portfolio on which you hold a mortgagee interest:	%		
Are you a seller/servicer of Fannie Mae or Freddie Mac loans?	Yes No		

Additional information may be required for underwriting reasons

Optional coverage / endorsements*

Liability Coverage?	Yes No	Foreclosure and Demolition (F&D)?	Yes No
Hazard Insurance Binding Limit per property:	\$	Indicated F&D Amount - \$1,000 to \$5,000 available:	\$
Do you have Commercial Equipment only loans?	Yes No	Do you have Farm Equipment only loans?	Yes No
		Farm out buildings?	Yes No
All Risk for Commercial?		Trust Properties?	Yes No
Residential vacant theft coverage?	Yes No	Ordinance or Law?	Yes No
Lender-placed flood coverage?	Yes No	Flood Commercial Contents	Yes No

Requested By:

Where should materials be sent:

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.

Authorized Signature

Date

*Optional coverage available upon Underwriter approval

**This is not a Binder. Coverage will not be considered bound unless written confirmation is provided by Proctor Financial, Inc.