

**MORTGAGE PROTECTION POLICY
REQUEST FOR PREMIUM INDICATION**

LENDERS RISK MANAGEMENT, INC.
305 West Chesapeake Avenue, Suite 211
Towson, MD 21204
Phone: 888-600-4436 / Fax: 410-296-7876

Part 1: General Questions

Financial Institution
Name: _____
Address: _____
Name(s) and Address(es) of
Servicing Subsidiary Company (ies): _____

Part 2: Questions Concerning the Applicant's Mortgage Portfolio:

*Note: "Applicant" is to be understood as Applicant plus servicing subsidiary(ies) name in Part 1.
"Value" should, where possible, exclude the value of loans secured solely by unimproved land.
For the purpose of this insurance, "Mortgage" includes 'Home Equity Loans' and '2nd Mortgages.'*

	Number	Total Value
Residential Mortgages (1 st s, 2 nd s and HELOCs secured by 1-4 family residences):		\$
All Other Mortgages:		\$
Total number of Foreclosed Properties on which you have <u>taken title</u> over the past 36 months:		
Claims in the most recent 3 years against Mortgage E&O, Mortgage Impairment or Force-Placed programs:		\$
States where owned and serviced mortgages are located: _____ _____ _____		

NOTICE TO APPLICANT: The information you provide above will be used to request a Premium Indication for the Mortgage Protection Policy. The Premium Indication is not an offer of coverage. You must provide a fully-completed, signed and dated Proposal Form (2006) for Mortgage Protection Insurance to obtain a proposal providing a firm premium quote and coverage terms. You may obtain this form from your Agent or from Lenders Risk Management, Inc.

Please Key Enter or Print the Following:

Financial Institution
Contact: _____ Date: _____
Phone: _____ Fax: _____ E-mail: _____

Agent/Broker Information:

Name: _____ Phone: _____
Address: _____ Fax: _____
City, State, Zip: _____ E-mail: _____