

**Mortgage Insurance  
 Application/Transmittal**

Lender Name			MGIC ID Number		
TPO Loan Y N	Third Party Originator (TPO) Name, City & State		TPO MGIC ID Number		
Borrower Name			Co-Borrower Name		
First-Time Homebuyer Y N	Self-Employed Y N	Race/Gender Codes <sup>(1)</sup> Race _____ Gender _____	First-Time Homebuyer Y N	Self-Employed Y N	Race/Gender Codes <sup>(1)</sup> Race _____ Gender _____
If refinance, is current loan insured by MGIC? Y N MGIC # _____					


<b>Borrower-Paid</b>		(1) This info is provided to the FFIEC. It is not used for U/W.			
Coverage _____ %	Premium Plan Options:				
Renewal Option Constant Declining	ZOMP! Monthly Premium Refund Option Refund No Refund	One-Time MI If One-Time MI is financed, Premium Financed \$ _____ Total Mortgage Loan Amt \$ _____	Split Premium Upfront .75% 1.50% 1.00% 1.75% 1.25% 2.00%		Level Annual

<b>Lender-Paid<sup>(2)</sup></b>		(2) Subject to proper disclosure under HPA.	
Coverage _____ %	Premium Plan Options:	Lender-Paid Singles	Lender-Paid Monthly

<b>FICO Credit Score</b>
Brwr/Co Brwr ____/____
Brwr 3/Brwr 4 ____/____

<b>DU<sup>®</sup> OR LP<sup>®</sup> - If Applicable</b>	
Fannie Mae Desktop Underwriter <sup>®</sup>	Refer w/Caution <sup>(3)</sup> _____ Expanded Approval <sup>(3)</sup> _____
Freddie Mac Loan Prospector <sup>®</sup>	500 A-Minus <sup>(3)</sup> (3) Expanded Criteria Rates Apply
Approve Refer	DU <sup>®</sup> or LP <sup>®</sup> Eligible Ineligible

<b>Lender AU System</b>
AU System _____
Rating _____

<b>Submission Information</b> (This information must be completed as applicable.)		
<b>If submitting the FNMA 1008/FHLMC 1077:</b>	<b>Additional Information:</b>	<b>If submitting the FNMA 1003/FHLMC 65:</b>
Borrower's Own Funds \$ _____	 Greg Korn Account Manager	Appraised Value \$ _____
Gift \$ _____		Property Detached Attached
Other \$ _____		Project Name _____
Seller Contributions \$ _____		Manufactured Home Y N
Manufactured Home Y N		

<b>ARM/Temporary Buydown/Interest-Only - If Applicable</b>		
ARM Index _____	For ARMs complete the following:	For GPM and other types of nonfixed payment loans, complete the following:
Margin _____	_____ Mos. to 1st Interest Rate Adjustment	_____ Months to First Payment Adjustment
Temporary Buydown _____ %	_____ Interest Rate Cap for 1st Adjustment	_____ Months Between Payment Adjustments
Annual Adj. 6-Mo. Adj.	_____ Mos. Between Subsequent Int. Rate Adj.	_____ Payment Cap Per Adjustment
Interest-Only I/O Term _____	_____ Interest Rate Cap for Subsequent Adj.	_____ No. of Payment Adjustments
Other _____	_____ Life Cap	

This application may be used for Mortgage Guaranty Insurance Corporation and MGIC Indemnity Corporation (each, MGIC). Coverage will be assigned by MGIC to the appropriate writing company. Lender, by its authorized representative, represents that the information provided to MGIC on this form and all additional documentation and information provided to MGIC, whether prepared or submitted by the Lender, originator (if different from Lender), borrower, appraiser or any other person or entity, is true, correct and complete. This representation is relied upon by MGIC in insuring this loan. Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or files a 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.

Person to Contact (please print)	Email	Signature of Lender's Authorized Representative
	Telephone #	Date ____ / ____ / ____