Mortgage Guaranty Insurance Corporation





Mortgage Guaranty Insurance Corporation, 270 E. Kilbourn Avenue, Milwaukee, Wisconsin 53202 (the "Company"), hereby agrees to insure the loan identified below, subject to: (1) the Insured's activation of coverage and timely payment of the initial premium; (2) the terms and conditions of the Master Policy; (3) the Endorsements, Notes and Conditions below, if any, and in reliance on the Application, supporting documentation and the Insured's representations.

Commitment/Certificate # 60413264	Loan 123456789 Number	Quote ID XXXXXXX
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INSURED'S PRINCIPAL PLACE OF BUSINESS		ORDERED BY	
Master Policy Number	99-999-9-9999	MGIC ID Number	99-999-9-9999
<u> </u>		Name and Address Smart Lending Company - Portfolio A 444 Wisconsin Street Madison, WI 53711	

LOAN INFORMATION			
Borrower Name(s) HOMEBUYER JANE		LTV / CLTV / HCLTV	95.00 / 95.00 / 95.00
		Amort Period / Loan Term	360 / 360
Subject Property Address		Representative Credit Score	780
244 WISCONSIN ROAD MILWAUKEE, WI 53201		Fixed Rate	Υ
		Loan Purpose	Purchase
		Occupancy Type	Primary Home
Base Loan Amount	\$190,000.00	Number of Units	1
Financed Premium Amount	\$0.00	Sales Price	\$200,000.00
Total Loan Amount	\$190,000.00	Original Value	\$210,000.00

INSURANCE INFORMATION		PREMIUM RATE	RATE	RATE W/T	AX
Commitment/Certificate #	60413264	1st Year Rate	.380		
Commitment Effective Date	03/06/2020	Renewal Rate yrs 2-10	.380		
Commitment Expiration Date	07/06/2020	Renewal Rate yrs 11-Term	.200		
LTV Category	95%				
Coverage %	Top 30%	PREMIUM TAX/ASSESSMENT	AUTHORITY		RATE
Premium Type	Monthly/ZOMP - BPMI	State			
Premium Refundability	Non-Refundable	County			
Renewal Option	Constant	Municipality			
		PREMIUM AMOUNT	MI PREMIUM	TAX	TOTAL
		Initial Monthly Premium	\$60.17		\$60.17
		Premium Due to Activate	\$0.00		\$0.00

Thank you for choosing MGIC.

Master Policy Number	99-999-9-9999	Commitment/Certificate #	60413264
ENDORSEMENTS AND NOTES			

- This Commitment/Certificate is insured under Mortgage Guaranty Master Policy 71-70384 (03/20).
- This Commitment/Certificate is issued subject to the State Variation Endorsement 71-70404 (03/20).
- This loan qualifies for Valuation Defect rescission relief under section 17 of the Master Policy.
- This loan will qualify for full rescission relief under section 17(c) (ii) of the Master Policy when the borrower has made the first 12 loan payments on time from the Borrower's Own Funds.
- MGIC reviewed the loan documentation provided for compliance with the MGIC Underwriting Guidelines under Non-Delegated Underwriting. The insured remains responsible for the accuracy and validity of the submitted documents and for determining compliance with the MGIC Underwriting Guidelines of any information not submitted.

CONDITIONS

Endorsements and Notes Messages

- 1 This message will appear on any Commitment/Certificate issued under the 2020 Master Policy.
- 2 This message will appear when the Master Policyholder's principal place of business is located in a state listed on the State Variations Endorsement.
- 3 This message will appear when the loan received property value rescission relief.
- 4 This message will appear for non-delegated loans that receive early rescission relief under the Closing Document Exception.
- 5 This message will appear for non-delegated loans insured under the 2020 Master Policy.

INSURED'S REPRESENTATIONS

By activating the insurance coverage, the Insured represents that: 1) the loan transaction, as described above, has been closed; 2) the loan information in this Commitment/Certificate (C/C) is true and correct as of the Certificate Effective Date and the Company can rely on it in extending coverage to the loan; 3) the conditions, if any, identified on this C/C have been satisfied; 4) the Application and supporting documentation are true and complete in all material respects and the Insured has no knowledge of any material changes in the Application information or supporting documentation as of the Certificate Effective Date; 5) if the Application was submitted under the Company's delegated program, the loan meets the Underwriting Guidelines in all material respects; and 6) there is no information in the Origination File or Closing File that is materially inconsistent with the Application, supporting documentation or the loan information above.

ADDITIONAL INFORMATION AND INSTRUCTIONS

Any assignment of the servicing of the loan or rights of the Insured under the C/C must be in accordance with the terms and conditions of the Master Policy. To activate the insurance coverage, follow the instructions provided on the Activation Notice. All capitalized terms herein shall have the same meaning as set forth in the Master Policy.

Mortgage Guaranty Insurance Corporation





To activate MGIC mortgage insurance, notify us within 15 days of loan closing. Loan must close on or before the Commitment Expiration Date.

Commitm	nent/Certificate #	60413264	Commitment Expiration Date	07/06/2020
Borrower	r Name(s)	'	MGIC ID Number	99-999-9-9999
HOMEBU	UYER JANE		MGIC ID Number	
Subject F	Property Address		Ordered By	
244 WIS	CONSIN ROAD		Smart Lending Company - Portfolio A 444 Wisconsin Street	
MILWAU	KEE, WI 53201		Madison, WI 53711	
	ation, please verify all informat o <u>www.mgic.com</u> for contact in		ate and report any discrepancies to your local MGIC	Underwriting Service
				CO. OO
	Premium Due to Activate		L	\$0.00
IF NO PR	REMIUM IS DUE, YOU MAY	ACTIVATE MGIC MORTGA	AGE INSURANCE ONLINE BY LOGGING IN	AT <u>WWW.MGIC.COM</u>
			DRM, COMPLETE THE FOLLOWING	
(Note: Only	send this Activation Notice	e. Keep the Commitment/Ce	rtificate for your records.)	
				, ,
	Provide the Loan Closing Da		·····	1 1
	(This is the Certificate Effective	e Date unless MGIC accepts ar	nother date.)	
			400450700	
		the correct number	123456789	
	(If inaccurate, please provide t	the correct number.)		
3.	Complete the following info	rmation if Servicing has trans	ferred.	
	Servicer Name			
	Address			
	Address			
	City/State			
4.	If no premium is due, fax thi	s completed Activation Notice	e to 800-711-6442.	
	If premium is due, mail this	completed Activation Notice v	with Premium Due to Activate to:	
	MGIC			
	P.O. Box 488 Milwaukee, WI 5320	1-0488		
		Thank you	for your business.	
TO CANCE	EL COMMITMENT PRIOR	TO EXPIRATION, COMPLE	TE THE FOLLOWING	
		·		
1.		e Commitment should be	e cancelled.	
2.	Fax this form to 800-711	-6442		