

Non-HARP Refi-to-Mod Request - SAME Insured/Servicer

Mortgage Guaranty Insurance Corporation • MGIC Indemnity Corporation • P.O. Box 525, Milwaukee, WI 53201-0525



When to use this form:

- Use only for MGIC's Non-HARP Same Insured/Servicer Refi-to-Mod Program to extend coverage on an MGIC-insured Original Loan to a Refinance Loan
- For a standard modification of an MGIC-insured loan, use the Notice of Loan Modification form
- For a standard refinance transaction, use MGIC's Mortgage Insurance Application/Transmittal
- Not sure which form to use? Please contact MGIC's Customer Service Center at 1-800-424-6442

Submission Instructions:

- Complete this form including the contact information and signature sections.
- Fax this form along with a Fannie Mae 1003/Freddie Mac 65 and a Fannie Mae 1008/Freddie Mac 1077 to the MGIC office covering your location:

1-800-437-1348 IL, IN, KY, MI, OH, WV, WI

1-787-765-6555 Puerto Rico

1-800-437-1350 AZ, AR, CO, IA, KS, MN, MO, NE, NM, ND, OK, SD, TX, WY

1-800-572-6102 AK, CA, HI, ID, MT, NV, OR, UT, WA, Guam

1-800-835-2394 CT, DE, DC, ME, MD, MA, NH, NJ, NY, PA, RI, VT, VA

1-800-437-8875 AL, FL, GA, LA, MS, NC, SC, TN

Note: MGIC reserves the right to request additional information.

The lender submitting this request (Requestor) represents that the following requirements will be satisfied:

- The Original Loan insured by MGIC must be current at the time of refinance.
(If not, please contact MGIC's Customer Service at 1-800-424-6442.)
- The Borrower cannot receive more than \$250 cash back at closing. Cash back in excess of \$250 identified on the HUD-1 must be applied as a principal curtailment to the Refinance Loan.
- The Borrower's sustainable ability to repay the loan must be improved through either a lower payment or more stable loan instrument on the Refinance Loan.
- The Requestor is the current Insured.
- All other Non-HARP Same Insured/Servicer Refi-to-Mod Program Requirements are met.

Requestor Company Name

Person to Contact (please print)

MGIC Certificate Number for Original Loan (if known)

Email

Borrower Name

Fax

Co-Borrower Name

Telephone Number

Subject Property Address

Signature of Requestor's Authorized Representative

Date

Requestor, 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 Requestor, originator (if different from Requestor), borrower or any other person or entity, is true, correct and complete. Requestor represents that it has and agrees that it will maintain all information relating to the origination and servicing of the Original Loan and that such information must be provided to MGIC, if requested, under the Master Policy. Requestor's representations and agreement are relied upon by MGIC in modifying the insurance coverage on the Original Loan and extending it to the Refinance Loan.



Thank you for your business – we appreciate it!