



Specified Professions Professional Liability Product

MORTGAGE BROKERS SUPPLEMENTAL APPLICATION

Please fill out the General Information section, along with the section(s) you are requesting coverage.

Applicant's Name: _____

If the Applicant is newly established, please provide best estimates.

1. Indicate the percentage of Applicant's current 12 month Gross Receipts from the following activities.

a. Loan Origination		%
b. Loan Servicing		%
c. Loan Underwriting		%
d. Loan Funding/Lending		%
e. Yield Spread Premiums		%
f. Other _____		%
Total	100	%

2. Provide a percentage loan placement breakdown.

a. Residential		%
b. Commercial		%
c. Construction		%
1. Residential Construction		%
2. Commercial Construction		%
d. Other _____		%

3. What percentage of the Applicant's Gross Receipts is derived from reverse mortgages? _____%

4. What percentage of the Applicant's Gross Receipts is derived from subprime market loans (i.e. loans written on B, C or D paper)?

B Paper		%
C Paper		%
D Paper		%

5. What percentage of the Applicant's Gross Receipts is derived from Federal Housing Authority (FHA) and Veterans Administration (VA) loans? _____%

6. What percentage of the Applicant's Gross Receipts is derived from interest-only loans? _____%

7. Does the Applicant have an in-house line of credit? Yes No

8. Is the Applicant affiliated or have common ownership with a real estate development company for which it provides mortgage loan services? Yes No

9. Does the Applicant provide origination services on behalf of only one bank or lender? Yes No

10. For the past 12 months, what is the Applicant's:

a. Average Loan Size	\$	
b. Largest Loan Originated	\$	
c. Total Dollar Value of Loans Originated	\$	

11. Has the Applicant or any past or present staff member ever been criticized, disciplined, or fined by any government agency, regulatory entity, investor group, warehouse wholesaler/banker, or the Department of Housing and Urban Development (HUD)? Yes No
 If "yes", please provide details: _____

This Mortgage Brokers Supplemental Application is attached to and forms part of the Professional Liability Application. This supplemental application is subject to the same provisions concerning representations made in the basic application.

Signature	Title	Date
Print Name		