

PERFORMING LOAN MODIFICATION

HARP • REFI WITH CERTIFICATE MODIFICATION • TRADITIONAL

United Guaranty Residential Insurance Company | United Guaranty Mortgage Indemnity Company
 230 N. Elm Street | Greensboro, NC 27420-1367
 Phone: 877.MI.CHOICE (877.642.4642) | Fax: 800.365.8109 | www.ugcorp.com

Use this form for modification of performing loans via HARP, Refinance with Certificate Modification, and Traditional Modification.

Please email the completed form to:
loanmods@ugcorp.com

Please complete the form in its entirety.

Modification Request Type		
<input type="checkbox"/> HARP	<input type="checkbox"/> Refinance with Certificate Modification	<input type="checkbox"/> Traditional
Contact Details		
Submitting Lender/Servicer Name:		
Same/New Servicer/Insured Address (City, State, ZIP):		Fax:
Submitter Name (First, Last):		Telephone:
Submitter Address (City, State, ZIP):		Email:
United Guaranty Certificate ID:		New Lender Loan Number:
Submission Type		
<input type="checkbox"/> Initial Request	<input type="checkbox"/> Revised Request	<input type="checkbox"/> Final Request
Borrower Information		
To add or remove a borrower from the existing policy, please provide 1003 with this submission.		
Borrower name (include first name, middle initial, last name):		
Co-Borrower name (include first name, middle initial, last name):		
Subject property address (include city, state, and ZIP code):		
Loan Information		
New Appraised Value:	Closing Costs and Prepays:	Estimated Cash Back to Borrower (may not exceed \$250):
New Loan Amount:	New Interest Rate:	New Mortgage Term:
Mortgage Insurance Information		Loan Type
MI Billing Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Annual <input type="checkbox"/> Single		<input type="checkbox"/> Fixed-Rate/Fixed Payment
MI Coverage Percent: (Note: Coverage percent may not increase from existing policy)		<input type="checkbox"/> ARM
MI Renewals: <input type="checkbox"/> Level <input type="checkbox"/> Declining		<input type="checkbox"/> ARM: with potential neg. am.
MI Refund Type: <input type="checkbox"/> Refundable <input type="checkbox"/> Non-Refundable		<input type="checkbox"/> Interest-Only
MI Premium Source: <input type="checkbox"/> Borrower Paid <input type="checkbox"/> Lender Paid (Note: Cannot be changed if existing Premium Source is a Single Premium Plan)		<input type="checkbox"/> Interest-Only Term: (if applicable)
Investor: <input type="checkbox"/> Fannie Mae <input type="checkbox"/> Freddie Mac <input type="checkbox"/> Other:		
Product Type:		
<input type="checkbox"/> DU Refi Plus	<input type="checkbox"/> Refi Plus	<input type="checkbox"/> LP Open Access <input type="checkbox"/> Relief Refinance <input type="checkbox"/> Other (please specify):
Payment Information		
Delinquency within last 12 months? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please enter the month(s) and year(s) in which the delinquency occurred (for example: December 2013, January 2014, August 2014, and so forth):		
Anticipated Close Date (mm/dd/yy):		