

NOTICE OF DELINQUENCY (First Lien)

MORTGAGE INSURANCE CO.

MI Certificate Number									Servicer Loan Number		
Servicer Name											
Servicer Address Street		City				State	ZIP				
INVESTOR (Check One): Freddie Mac Fannie Mae Other											
Mortgagor Name First	Middle				Last						
Co-Mortgagor Name	Middle				Last						
Property Address Street				City				State		ZIP	
Mailing Address If Different Street				City				State		ZIP	
Home Telephone Numb	Work Telephone Number			mber							
CURRENT PRINCIPAL BALANCE (exclude all delinquent interest, etc.): BANKRUPTCY											
TOTAL DELINQUENT AMOUNT:									File Date: / / Chapter:		
LOAN DUE FOR DATE:	MONTH	DAY	YEAR						Is this a First P	Payment Default?	
Yes No REASON FOR NON-PAYMENT											
Unemployment Temporary Loss of Income Moved/Vacated											
Marital Problems Bankruptcy				Dissatisfaction w/ Property					OCCUPANCY STATUS (Check Status):		
Illness Excessive Use of Cr				edit Energy/Environment Cost					MORTGAGOR		
Death Casualty Loss				Servicer Problem (Explain Below)					TENANT		
Business Failure VACANT											
DATE OF LAST MORTGAGOR CONVERSATION: MONTH		I DAY	YEA	R							
SERVICER'S NEXT ACTION WILL BE (Check One):											
Loan Modification/Workout Negotiate Payment Plan											
Recommend Mortgagor List for Sale				Promise to Pay Date: If available / /							
Offer to Take Voluntary Conveyance (DIL)				Pending Refinance							
Foreclosure											
DESCRIBE SERVICER'S COLLECTION EFFORTS:											
Servicer Contact											
Servicer Phone -	_		Ex	ĸt.				Date			