Enact Mortgage Insurance

8325 Six Forks Road Raleigh, North Carolina 27615 919-846-4100 Toll Free 800-334-9270 ActionCenter® 800-444-5664



Click to Clear Form

Assumption Request

This form should be submitted for all Assumption Requests for Enact's consideration. All assumptions, with or without release of liability, require Enact approval prior to completion. In some cases, the Insured is prohibited by applicable law from exercising its rights under a "due on sale" clause or is obligated by applicable law to consent to an assumption. The Insured is responsible to ensure the original note or security instrument (deed of trust or mortgage) does not impose any restrictions to an assumption.

| Assumption Request Type: | [| ☐ With Release of Liability | ☐ Without Release of Liability | |
|------------------------------|------|-----------------------------|-----------------------------------|------|
| Servicer/Insured Name: | | | | |
| Certificate Number: | | | Loan Number: | |
| Contact Name (please print): | | | | |
| Contact Email: | | Contact Phone Number: | | |
| Borrower Information | | | | |
| Current Borrower Name: | LAST | | FIRST | M.I. |
| ssuming Borrower Name: _ | | | | |
| | LAST | | FIRST | M.I. |
| Assuming Co-Borrower Name | LAST | | FIRST | M.I. |
| ate of Assumption: | | Have the terms of the deed | of trust or mortgage changed? Yes | No |
| | | | | |

Documentation

The following documentation is required. A new appraisal is not required.

- · Enact Current MI Certificate
- 1008 and 1003
- · Credit Report and any/all supporting documents
- · Paystub(s) and W-2s for each borrower
- VOF
- 2 MONTHS Bank Statements verifying sufficient funds to close or VOD
- Include any other supporting documentation that may be needed to make an underwriting decision.
- Most recent 2 years 1040s if self-employed*
- · Gift letter and proof of receipt*
- Assumption Purchase Agreement *
- Divorce Papers*
- Separation Agreement*
- Child Support Agreement*
- Lease Agreement*

*This documentation is only required if applicable.

Enact may request additional documentation as deemed necessary for the Assumption Request decision.

Submission: Non-Delinquent Assumptions

Submit the Assumption Request and applicable documentation to the attention of Central Imaging by one of the following methods. Please verify that your delivery selection meets your organization's security requirements for transmission of borrower information.

Mail to: Central Imaging - MI Only Enact Mortgage Insurance 8325 Six Forks Road Raleigh, NC 27615

Online Via Secure Submission: Servicing.EnactMI.com

Email to: documentprocessing@EnactMI.com

Please use one of the following in your subject line to ensure your Assumption Request is appropriately routed:

Assumption Request OR Release of Liability.

Submission: Delinquent Assumptions

Submit the Assumption Request and applicable documents to HomeOwner Assistance by one of the following methods. Please verify that your delivery selection meets your organization's security requirements for transmission of borrower information.

Online Via Secure Submission: Servicing.EnactMl.com

Email to: HOA@EnactMl.com

Please use one of the following in your subject

| | line to ensure your Assumption Request is appropriately routed: Assumption Request OR Release of Liability. |
|---|--|
| If loan is in Default, does assumption bring current? Yes | No |
| If no, please explain | |
| | |
| Authorization | |
| This section must be completed with every submission. Insured represents the Application, submitted under the terms of the applicable Policy, is true and no information has been omitted that makes other information provided untrue, inaccurate under our delegated underwriting program, the loan meets our Underwriting Guidelines in all rany insurance company or other person, files an application for insurance or statement of clair misleading, information concerning any material fact thereto, may be subject to criminal and cistate specific disclosures at EnactMI.com Authorized Name (please print): | e or incomplete, or the loan ineligible for coverage. For Applications submitted material respects. Any person who knowingly and with the intent to defraud m containing any materially false information or conceals, for the purpose of civil liability under state and/or federal law. See State Fraud Warnings for |
| Authorized Signature: | |
| Title: | Date: |
| | |
| | |

Please contact our ActionCenter at 800-444-5664 with any questions.

