

Genworth Mortgage Insurance Corporation

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MASTER POLICY ENDORSEMENT

REQUEST FOR RECONSIDERATION

Policy Issued To:

Attached to and Forming Part of Master Policy No:

Effective Date of Master Policy:

Effective Date of Endorsement:

It is understood and agreed that the above-captioned Master Policy is hereby amended as set forth below. Terms used and not defined in this Endorsement have the meanings set forth in the Policy.

- 1. Section 4.4(a) (Request for Reconsideration) and 4.4(b) (Company Determination) of the Policy are hereby amended by deleting such subsections in their entirety and replacing the subsections with the following:
- (a) Request for Reconsideration. The Beneficiary, or the Servicer on the Beneficiary's behalf, is entitled, no later than 120 days following receipt of a Company Cancellation Notice, Rescission Notice, Claim Denial Notice, or receipt of an Explanation of Benefits identifying an Insurance Benefit reduction, to request in writing that we reconsider our decision, provided however, the Servicer and Beneficiary shall provide all information and documentation we require for evaluation of the request within such 120-day period, as specified in our then-current Servicing Guide (or, with respect to documentation from the Loan Origination File or otherwise relating to Origination of the Loan, the Servicing Guide in effect on the date the Insurance Application was received by us), and the request for reconsideration will not be considered submitted until all such information has been received.
- (b) Company Determination. We will make a determination with respect to any such request within 60 days following submission of the request for reconsideration with all required information and documentation and supplemental information determined to be appropriate by the Servicer or Beneficiary. If all required information is not submitted during the 120-day period set forth in paragraph 4.4(a) (Request for Reconsideration), we will deny such request. If, after review of the request, we determine that the Servicer or Beneficiary has provided evidence or an explanation reasonably satisfactory to rebut the cancellation, rescission, Claim denial or Insurance Benefit reduction, then unless there is another basis for cancellation, rescission, Claim denial or reduction in the Insurance Benefit, we will,
 - (i) in the case of a rescission or cancellation, reinstate coverage on the Certificate, effective as of the date of the rescission or cancellation effective date, provided that we have received all refunded Premium and any additional Premium then due, and
 - (ii) in the case of a Claim denial or Insurance Benefit reduction, pay the Insurance Benefit (calculated in accordance with and subject to any reductions provided for in this Policy) in full within 10 Business Days of such determination.

Nothing herein contained shall be held to vary, alter, waive or extend any of the terms, conditions, provisions, agreements or limitations of the Policy or any endorsement thereto, other than to the extent expressly set forth above.

IN WITNESS WHEREOF, we have caused this Endorsement to be signed by our duly authorized officers in facsimile.

President

Secretary