ESSENT
ESSENT GUARANTY, INC.

Loss Management Department
101 S. Stratford Rd., Suite 400
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lossmanagement@essent.us
1-877-331-9077

NOTICE OF DEFAULT and MONTHLY STATUS UPDATE

Certificate #_____ Servicer Name _____ Servicer Loan # _____

Investor: ☐ Fannie Mae ☐ Freddie Mac ☐ Other _____

Borrower Name: _____ Borrower Phone # _____
Property Address: _____ _____ _____ _____-_____
Street City State Zip

Loan Due for Date: ___/___/_____ Total Delinquent Amount: $_____
Foreclosure Filed Date: ___/___/_____ Anticipated Foreclosure Sale Date: ___/___/_____
Bankruptcy Filed Date: ___/___/_____ Chapter: _____
Cured Date: ___/___/_____
(Please indicate how cured: ☐ paid current ☐ paid off ☐ modification ☐ forbearance)

Reason for Delinquency: (For initial reporting only; not required for monthly status updates)

☐ Abandoned ☐ Business Failure ☐ Bankruptcy ☐ Casualty Loss
☐ Death ☐ Disregard ☐ Excessive Credit Use ☐ Illness
☐ Job Transfer ☐ Marital ☐ Unemployment ☐ Unknown
☐ Other _____

Borrower Occupying Property: ☐ yes ☐ no Contact with Borrower: ☐ yes ☐ no
Date of Last Contact: ___/___/_____

Servicing Efforts: ☐ Borrower Promise to Pay ☐ Repayment Plan ☐ Forbearance Plan
☐ Modification Pending ☐ Deed in Lieu Pending
☐ Short Sale Pending ☐ Foreclosure Action Pending or Filed

Comments: _____
_____
_____

Date ___/___/_____ Submitted by: _____ PH # _____ _____ _____ Ext _____
Address: _____Email:_____

Submission of this form will serve as certification to Essent Guaranty, Inc. that the statements contained herein are true, accurate and complete in all respects. Essent Guaranty, Inc. shall be entitled to rely fully on any information contained herein.