

Loss Management Department 101 S. Stratford Rd., Suite 400

Winston Salem, NC 27104 lossmanagement@essent.us 877.331.9077

Notice of Default and Monthly Status Update

Certificate #	Servicer Name:		Servicer Loan #	
Investor:	Freddie Mac 🔲 Other:			
Borrower Name:	Borrower Phone #			
Property Address:				
Street:	City:	State:	Zip:	
Loan Due for Date: /	1	Total Delinguent Amour		
Foreclosure Filed Date:	1 1	·		
Bankruptcy Filed Date:	<u> </u>	·		
Cured Date: / /	,	onapton.		
(Please indicate how cured:	I paid current □ paid off □ mo	odification		
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:				
onime				
Date: / /	Submitted by:	PH#	Ext:	
Address:	Email:			

Note: 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.