



5225 Crooks Road, Troy, MI 48098

Re: Insurance Claim Procedures

Dear Borrower(s):

Home Point Financial Corporation's requirements for handling insurance claims are outlined in the below information and attached documents.

Claims for losses of \$15,000 and below will require your endorsed claim check, signed and notarized Mortgagor's Affidavit of Repair Certification and the adjustor's report from your insurance company. Your claim funds will be returned to you providing your loan is current.

For losses over \$20,000, it is extremely important that Home Point Financial receive all items listed below to ensure proper handling of the claim:

- § Claim check with back signed by all parties other than Home Point Financial.
- § The complete/fully itemized adjustor's report issued by your insurance company.
- § Signed and accepted contractor's proposal.
- § Contractor's signed and completed W9.
- § Contractor's license or proof of insurance.
- § Home Point Financial Loss Draft Claim Form (please complete page 3 and return to us).
- § Signed and notarized Mortgagor's Affidavit of Repair Certification (refer to page 4).

For losses between \$15,000 and \$20,000 your investor may have specific restrictions that will supersede the above guidelines. Please contact a customer service representative for additional information.

Please understand that Home Point Financial will do its part to ensure the claim settlement process moves as quickly and smoothly as possible. Please allow 7-10 business days for the initial draw once all the above documents are received. We will not be able to release any funds until the required documents are received and complete.

Please send the documents to the following address:

Home Point Financial Corporation c/o PFIC*
Attention: Loss Draft Department
5225 Crooks Road
Troy, MI 48098-2823



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To continue processing your claim, the following items will be required each time a draw is requested:

- § Waiver of lien/sworn statement – contractor
- § Letter of satisfaction – homeowner (only needed for final draw)

Home Point Financial will release funds based on the percentage of work that the inspection verifies as complete, if required.

Please be assured that we are here to assist you with the restoration of your property.

If you or your contractor has any questions, please contact us at the toll-free number below.

Sincerely

Home Point Financial

Phone: (877) 634-0960 Monday through Friday, 8:30 a.m. to 5:00 p.m. Eastern Time

Fax: (248) 878-2422

Email: LossDrafts@homepointfinancial.com

Loss Draft Claim Form

This form must be completed and returned with all items listed on the procedure letter. The information you provide below will help us to better serve you during your loss.

Phone Number: _____

E-mail: _____

Preferred Contact Method (phone, e-mail, or mail): _____

Preferred Contact Time (morning, afternoon, evening): _____

Insurance Adjustor's Name: _____

Insurance Adjustor's Phone Number: _____

Please name all persons authorized to speak on the claim, not previously listed:

Signature

Date

Signature

Date

Please complete and return to:

Home Point Financial Corporation c/o PFIC*
Attention: Loss Draft Department
5225 Crooks Road
Troy, MI 48098-2823

If you have any questions, please call us toll-free at (877) 634-0960, Monday through Friday 8:30 a.m. to 5:00 p.m. Eastern Time. We also can be reached by fax at (248) 878-2422.

Mortgagor's Affidavit of Repair Certification Loss Draft Funds Release

****ALL SECTIONS OF THIS FORM MUST BE COMPLETED****

Date: _____

Loan#: _____

Property Address: _____

State of: _____

County/Parish of: _____

I/we, the undersigned mortgagor(s) here by state that the damages sustained at our property, will be/have been completed per the insurance adjuster's scope and will/does:

- Comply with all applicable state and local codes and regulations governing residential repair or reconstruction, including, but not limited to; building codes, zoning codes, work permits and inspections.

I/we the undersigned mortgagor(s) also hereby state that all bills for materials and labor will be/have been paid from the insurance loss proceeds. There will be no Mechanics Liens or Material providers liens filed as a result of lack of payment for the repair/reconstruction work.

I/we the undersigned mortgagor(s) acknowledge that upon execution of this Affidavit, insurance loss proceeds will be released per guidelines. Funds are released in incremental disbursements. Upon completion of work and at each draw request, an insurance loss inspection will be scheduled to confirm percentage of completion. With satisfactory results, Waiver of Liens from contractors, and Letter of Satisfaction of repairs from the borrower, the final payment will be disbursed.

Signature

Date

Signature

Date

Sworn to before me and subscribed in my presence:

On this _____ day of _____, 20____

State of: _____ County/Parish of: _____

Notary seal:

Notary Signature: _____

My Commission expires: _____



5225 Crooks Road, Troy, MI 48098

Date: _____

To: Home Point Financial Corporation c/o PFIC*
5225 Crooks
Troy, MI 48098-2823

RE: Property Loss Claim
Loan #:

LETTER OF SATISFACTION

I/we hereby certify that the restoration, repairs or improvements have been partially/fully completed and the property is in as good or better condition than existed prior to the loss, and that I/we are fully satisfied with the repairs.

Owner Signature

Date

Owner Signature

Date

Owner Signature

Date

Waiver of Lien

My/our contract with: _____

To provide: _____

Full Property Address: _____

Loan #: _____

(Check One)

_____ **Partial Conditional**

I/we hereby waive my/our construction lien to the amount of \$ _____, for the labor/materials provided through (date) _____. This waiver, together with all previous waivers, if any (circle one) does/does not cover all amounts due to me/us for contract improvement provided through the date shown above. This waiver is conditioned on actual payment of \$ _____.

_____ **Partial Unconditional**

Having been fully paid and satisfied, I/we hereby waive my/our construction lien to the amount of \$ _____ for labor/materials provided through (dates) _____. This waiver, together with all previous waivers, if any (circle one) does/does not cover all the amounts due to me/us for contract improvement provided through the date show above.

_____ **Full Conditional**

Having been fully paid and satisfied, all my/our construction lien rights against such property are hereby waived and released. This waiver is conditioned on actual payment of \$ _____.

_____ **Full Unconditional**

Having been fully paid and satisfied, all my/our construction lien rights against such property are hereby waived and released.

Signature_____
Date

Company: _____

Address: _____

Phone: _____

Sworn Statement

All workers and all merchandise obtained by us/me will be the responsibility of the undersigned.

Signature_____
Date