

SERFF Tracking Number: LDRD-125723187 State: Arkansas
Filing Company: Republic Mortgage Insurance Company State Tracking Number: EFT \$50
Company Tracking Number: 070-808
TOI: 06.0 Mortgage Guaranty Sub-TOI: 06.0000 MG Sub-TOI Combinations
Product Name: Revised Form Filing - Commitment/Certificate
Project Name/Number: Revised Form Filing - Commitment/Certificate/070-808

Filing at a Glance

Company: Republic Mortgage Insurance Company

Product Name: Revised Form Filing - Commitment/Certificate SERFF Tr Num: LDRD-125723187 State: Arkansas

TOI: 06.0 Mortgage Guaranty

SERFF Status: Closed

State Tr Num: EFT \$50

Sub-TOI: 06.0000 MG Sub-TOI Combinations Co Tr Num: 070-808

State Status: Fees verified and received

Filing Type: Form

Co Status: Filed

Reviewer(s): Betty Montesi,
Llyweyia Rawlins

Authors: Cindie Lowe, Angela
Martin, Willonda Thomas, Jackie
Wall

Disposition Date: 07/15/2008

Date Submitted: 07/14/2008

Disposition Status: Approved

Effective Date Requested (New): 10/06/2008

Effective Date (New): 10/06/2008

Effective Date Requested (Renewal):

Effective Date (Renewal):

State Filing Description:

General Information

Project Name: Revised Form Filing - Commitment/Certificate

Status of Filing in Domicile: Pending

Project Number: 070-808

Domicile Status Comments:

Reference Organization:

Reference Number:

Reference Title:

Advisory Org. Circular:

Filing Status Changed: 07/15/2008

State Status Changed: 07/15/2008

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

Enclosed herewith for your review and filing/approval is Republic Mortgage Insurance Company's (RMIC) revised Commitment/Certificate. The changes to this form were developed to provide more detailed information on the commitment/certificate. This form supercedes and replaces the 11/88 edition of the same form number. Enclosed is attachment 1, which is a table indicating the purpose of the form and all significant changes being made.

SERFF Tracking Number: LDRD-125723187 State: Arkansas
 Filing Company: Republic Mortgage Insurance Company State Tracking Number: EFT \$50
 Company Tracking Number: 070-808
 TOI: 06.0 Mortgage Guaranty Sub-TOI: 06.0000 MG Sub-TOI Combinations
 Product Name: Revised Form Filing - Commitment/Certificate
 Project Name/Number: Revised Form Filing - Commitment/Certificate/070-808

RMIC proposes that this form become effective October 6, 2008. If you should have any questions or need additional information, please do not hesitate to call me at 800-999-7642, extension 4268 or by email, cindie_lowe@rmic.com.

Company and Contact

Filing Contact Information

Cindie Lowe, Assistant Compliance Manager cindie_lowe@rmic.com
 190 Oak Plaza Boulevard (336) 661-4268 [Phone]
 Winston-Salem, NC 27105 (336) 661-2135[FAX]

Filing Company Information

Republic Mortgage Insurance Company	CoCode: 28452	State of Domicile: North Carolina
101 North Cherry Street	Group Code: 150	Company Type: Mortgage Guaranty
Winston-Salem, NC 27101	Group Name: ORMGG	State ID Number:
(800) 999-7642 ext. [Phone]	FEIN Number: 56-1031043	

Filing Fees

Fee Required?	Yes
Fee Amount:	\$50.00
Retaliatory?	No
Fee Explanation:	\$50.00 per filing
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Republic Mortgage Insurance Company	\$50.00	07/14/2008	21389879

SERFF Tracking Number: LDRD-125723187 State: Arkansas
Filing Company: Republic Mortgage Insurance Company State Tracking Number: EFT \$50
Company Tracking Number: 070-808
TOI: 06.0 Mortgage Guaranty Sub-TOI: 06.0000 MG Sub-TOI Combinations
Product Name: Revised Form Filing - Commitment/Certificate
Project Name/Number: Revised Form Filing - Commitment/Certificate/070-808

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Llyweyia Rawlins	07/15/2008	07/15/2008

SERFF Tracking Number: LDRD-125723187 *State:* Arkansas
Filing Company: Republic Mortgage Insurance Company *State Tracking Number:* EFT \$50
Company Tracking Number: 070-808
TOI: 06.0 Mortgage Guaranty *Sub-TOI:* 06.0000 MG Sub-TOI Combinations
Product Name: Revised Form Filing - Commitment/Certificate
Project Name/Number: Revised Form Filing - Commitment/Certificate/070-808

Disposition

Disposition Date: 07/15/2008

Effective Date (New): 10/06/2008

Effective Date (Renewal):

Status: Approved

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: LDRD-125723187 *State:* Arkansas
Filing Company: Republic Mortgage Insurance Company *State Tracking Number:* EFT \$50
Company Tracking Number: 070-808
TOI: 06.0 Mortgage Guaranty *Sub-TOI:* 06.0000 MG Sub-TOI Combinations
Product Name: Revised Form Filing - Commitment/Certificate
Project Name/Number: Revised Form Filing - Commitment/Certificate/070-808

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Supporting Document	Attachment 1	Approved	Yes
Form	Commitment/Certificate	Approved	Yes

SERFF Tracking Number: LDRD-125723187 State: Arkansas
 Filing Company: Republic Mortgage Insurance Company State Tracking Number: EFT \$50
 Company Tracking Number: 070-808
 TOI: 06.0 Mortgage Guaranty Sub-TOI: 06.0000 MG Sub-TOI Combinations
 Product Name: Revised Form Filing - Commitment/Certificate
 Project Name/Number: Revised Form Filing - Commitment/Certificate/070-808

Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type	Action	Action Specific Data	Readability	Attachment
Approved	Commitment/Certificate	DP-0002	10/08	Certificate	Replaced	Replaced Form #:0.00 DP-0002 (11/88) Previous Filing #:		Commitment monthly blank.pdf



Commitment/Certificate

Version

Republic Mortgage Insurance Company • Republic Mortgage Insurance Company of North Carolina (NY only)
101 N. Cherry Street • Winston-Salem, NC 27101 • 1-800-999-7642

Offer of Insurance: This form serves as a combined Commitment/Certificate. Republic Mortgage Insurance Company, in reliance on the Insured's representations in the Application, offers to insure against Loss due to Default by the Borrower on the Loan described below. This offer is subject to the terms and conditions of the Master Policy, endorsements, and any additional conditions set forth below, and to the Insured's acceptance and certification. Any material misrepresentation in the Application or any revision to the terms and conditions set out below shall void this document unless the revisions are approved in writing by RMIC.

Insured's Information

Insured Loan Number
Submission Method
Master Policy Number
Endorsements

Loan Information

Borrower Names

Property Address

Insured Loan Amount
Sales Price
Appraised Value (Estimate)
Loan-to-Value (LTV)
Amortization Type
Amortization Period
Negative Amortization
Occupancy Type
Manufactured Housing
Interest Only
Documentation Type
Loan Purpose

Insurance Information

Commitment/Certificate Number
Commitment Effective Date
Commitment Expiration Date
Coverage
Payment Option
Renewal Option
Premium Refundability
Rate Program

Premium Rate Information

Initial Premium Amount
Total Tax/Assessment Due
Advanced Premium Payment
Total Amount Due
Initial Rate Annualized for Months to
Annualized Renewal Rates
Months to
Months to

Special Conditions

Notes

This Commitment/Certificate premium quotation reflects the best rate available based upon information and data submitted to RMIC by the Insured. If the Insured determines that the premium quotation is not accurate, it is the Insured's responsibility to notify RMIC. Upon receipt of notification from the insured that MI coverage on this loan was canceled under the provisions of the Homeowners Protection Act of 1998, RMIC will refund any unearned premium within 30 days. The Company has caused this Commitment/Certificate to be signed by its duly authorized officers in facsimile to become effective as its original signatures and binding on the Company by virtue of countersignature by its duly authorized agent.

Insured's Acceptance and Certification

The Insured accepts the RMIC coverage offered and validates this Commitment as a Certificate by certifying that: (1) The transaction described above has been duly Consummated; and (2) Equity in the property is from the Borrower's own cash unless otherwise disclosed in the Application; and (3) Any additional conditions have been or will be satisfied; and (4) The Insured has included, or otherwise attached, its copy of the executed Commitment/Certificate to its original copy of the entire Application package, which becomes a part of the Policy; and (5) The Insured remits the premium amount due within 15 days after the Effective Date. (Effective Date is the later of the Loan Consummation Date or the Commitment Effective Date.)

To activate your insurance, please return completed Certification Notice.



Certification Notice

Version

Republic Mortgage Insurance Company • Republic Mortgage Insurance Company of North Carolina (NY only)
101 N. Cherry Street • Winston-Salem, NC 27101 • 1-800-999-7642

Attention: Loan Closing Agent

To activate RMIC mortgage insurance, complete and return this document immediately after closing.

If you use the fax or any electronic method, retain this document for your files.

Fax Number: 800-386-4007

Phone Number: 800-999-7642

Online: www.rmic.com

Mail check and this Certification Notice to:

RMIC

Lockbox #402958

Atlanta, GA 30384-2958

Insurance Certification Requirements

Please provide the following after closing.

Loan Closing Date* _____

Servicer Loan Number _____

Premium Due for Certification _____

ZIP Monthlies Premium Plan: Do not send payment now.
RMIC will bill the current servicer of record.

* This is the Certificate Effective Date unless RMIC accepts another date.

Servicing Transfer

Please provide the following information if servicing has been transferred

Insured's Name and Address

Master Policy Number

New Servicer/Insured

Lender Name _____

Address _____

City/State/Zip _____

New Servicer Loan Number _____

Authorized Signature

Date

Loan Information

Please verify the following information and report any changes to your local RMIC Underwriting Office.

Commitment/Certificate Number

Borrower Names

Property Address

Loan-to-Value (LTV)

Coverage

Insured Loan Amount

Sales Price

Appraised Value (Estimate)

If MI is no longer required, please indicate "Cancel" and fax to RMIC at 800-386-4007.

SERFF Tracking Number: LDRD-125723187 *State:* Arkansas
Filing Company: Republic Mortgage Insurance Company *State Tracking Number:* EFT \$50
Company Tracking Number: 070-808
TOI: 06.0 Mortgage Guaranty *Sub-TOI:* 06.0000 MG Sub-TOI Combinations
Product Name: Revised Form Filing - Commitment/Certificate
Project Name/Number: Revised Form Filing - Commitment/Certificate/070-808

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: LDRD-125723187 State: Arkansas
Filing Company: Republic Mortgage Insurance Company State Tracking Number: EFT \$50
Company Tracking Number: 070-808
TOI: 06.0 Mortgage Guaranty Sub-TOI: 06.0000 MG Sub-TOI Combinations
Product Name: Revised Form Filing - Commitment/Certificate
Project Name/Number: Revised Form Filing - Commitment/Certificate/070-808

Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-
Property & Casualty **Review Status:** Approved 07/15/2008

Comments:

Attachments:

Transmittal signed.pdf
form filing schedule.pdf

Satisfied -Name: Attachment 1 **Review Status:** Approved 07/15/2008

Comments:

Attachment:

Attachment 1 - Form Comparison.pdf

Property & Casualty Transmittal Document—

20. This filing transmittal is part of Company Tracking # 070-808

21. Filing Description [This area should be similar to the body of a cover letter and is free-form text]

Please see Filing Description in General Information tab.

22. Filing Fees (Filer must provide check # and fee amount if applicable)
[If a state requires you to show how you calculated your filing fees, place that calculation below]

Check #: Sent via EFT
Amount: \$50.00

Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.

*****Refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)**

FORM FILING SCHEDULE

(This form must be provided **ONLY** when making a filing that includes forms)

(Do not refer to the body of the filing for the forms listing.)

1.	This filing transmittal is part of Company Tracking #	070-808			
2.	This filing corresponds to rate/rule filing number (Company tracking number of rate/rule filing, if applicable)				
3.	Form Name /Description/Synopsis	Form # Include edition date	Replacement or Withdrawn?	If replacement, give form # it replaces	Previous state filing number, if required by state
01	Please see Attachment 1.		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		
02			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		
03			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		
04			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		
05			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		
06			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		
07			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		
08			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		
09			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		
10			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		

To be complete, a form filing must include the following:

1. A completed Form Filing Schedule Document (PC FFS-1) **(Do not refer to the body of the filing for the forms listing.)** and,
2. A completed Property & Casualty Transmittal Document (PC TD-1), and
3. One copy of each form to be reviewed for the reviewer's records, and
4. One copy of any other components/exhibits submitted with the filing, and
5. The appropriate state Review Requirements, if required, and
6. The appropriate filing fees, if required, and
7. A postage-paid, self-addressed envelope large enough to accommodate the return.
8. You should refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)

**Attachment 1
Comparison of Form Revised to Form Being Filed**

Form Being Revised	Title and Purpose of Form	Changes to Form Being Filed
<p>DP-0002 (11/88)</p>	<p>Commitment/Certificate</p> <p>The purpose of this form is to serve as a combined Commitment/Certificate. Republic Mortgage insurance Company and Republic Mortgage Insurance Company of North Carolina, in reliance on the Insured's representations in the Application, offers to insure against Loss due to Default by the borrower. This offer is subject to the terms and conditions of the Master Policy, endorsements, and any additional conditions set forth on the Commitment/Certificate and the Insured's acceptance and certification.</p>	<p>DP-0002 (10/08)</p> <ul style="list-style-type: none"> • Insured Information consolidated and grouped together <ul style="list-style-type: none"> ○ Changed Insured's Identification Number to Insured Loan Number ○ Changed Master Policy Form Number to Master Policy Number ○ Changed Endorsement Form Number(s) to Endorsements ○ Submission Method is labeled • Grouped Loan Information together <ul style="list-style-type: none"> ○ Removed Loan Amount ○ Changed Insured Amount to Insured Loan Amount ○ Changed Sales Price or Cost to Sale Price ○ Added (Estimate) to Appraised Value ○ Changed Loan -to-Value Ratio to Loan-to-Value (LTV) ○ Added Amortization Type ○ Added Amortization Period ○ Added Negative Amortization ○ Changed Occupancy to Occupancy Type ○ Added Manufactured Housing ○ Added Interest Only ○ Added Documentation Type ○ Added Loan Purpose • Grouped Insurance Information together <ul style="list-style-type: none"> ○ Changed Optional Guaranty Coverage to Coverage ○ Added Payment Option ○ Added Renewal Option ○ Added Premium Refundability ○ Changed RMIC Plan Number to Rate Program • Grouped Premium Rate Information together <ul style="list-style-type: none"> ○ Changed First Year Premium to Initial Premium Amount ○ Added Total Tax/Assessment Due ○ Changed Less: Amount Paid to Advanced Premium Payment ○ Changed Premium Amount Due to Total Amount Due ○ Added Initial Rate Annualized for Month ___ to ___ ○ Added Annualized Renewal Rates ○ Added Assessment Disclosures for Florida ○ Added Tax Disclosures for Kentucky and West Virginia ○ Added Special Conditions • Removed Corporate Seal • Included the following language in the notes section the following language: "Upon receipt of notification from the Insured that MI coverage on this loan was canceled under the provisions of the Homeowners Protection Act of 1998, RMIC will refund any unearned premium within 30 days". • Added the Certification Notice on the second page of the commitment/certificate which details how to activate RMIC mortgage insurance based on the information on the commitment/certificate.