



I. General Information

To provide the highest level of customized service to our network of agents, Essent Title utilizes ALTA Best Practices as a baseline for reviewing and approving agency applications. Throughout this application, you'll see references to the ALTA Best Practices pillars.

| A. | Name of your Agency: | | | |
|----|---|-----------------------|----------------------------|---|
| В. | Your Agency is a: Sole Proprietorship Partnership | Corporation | LIC | |
| C. | Your federal ID#: | | Number of years in ope | eration: |
| D. | Primary address: | | | |
| E. | Business phone: | | Business email: | |
| F. | States to be appointed: | | | |
| | Ownership and Management Inform | | | |
| A. | List all active corporate officers, directors, p | | ders who own 10% or mo | |
| | Name | Position | | % Ownership |
| В. | Do any of the people identified above have, other title insurance-related business? | • | ownership interest in and | other settlement services, abstracting or |
| | If yes, please explain: | | | |
| C. | List other underwriters (active and inactive) | and year appointed (| if inactive, please attach | explanation): |
| | Underwriter | Date of Initial Appoi | ntment | Active or Inactive |





| D. Are you in the process Yes No | Are you in the process of discontinuing/terminating any active Agency relationships with any of the above underwriters? Yes No | | | | |
|---|---|---------------------------------|--------------------------|---------------------------|------------|
| If yes, please provide t | he reason for the dis | continuation/termination: | | | |
| E. Has your Agency or an regulatory enforcement of yes, please explain: | | ntified above ever been subj | ect to any litigation, I | named in a lawsuit or sub | ect to any |
| F. Has your Agency or an | y of the persons ider | ntified above ever filed for ba | ankruptcy? 🗌 Yes | □ No | |
| III. Business and Ope | | tion erwriters: \$ | | | |
| | | Title: \$ | | | |
| | | | | | |
| | Commercial: | | Residential: | | |
| D. Source of business an | d percentage of tota | l business makeup (select a | ll that apply): | | |
| Attorney | % | Bank/Credit Union | % | Builder | % |
| Developer | % | Mortgage Banker | % | Real Estate Agent _ | % |
| ☐ Hard Money Lende | r % | ☐ Investor | % | Other | % |
| If any source of busine | ess is from an affiliat | ed entity, complete the Affil | iated Business Adde | ndum. | |
| E. Does any single custor | mer provide more tha | an 20% of your total title bus | siness? | No | |
| If yes, please indicate | the company or indiv | ridual: | | | |

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| F. | Provide the name of software providers you Title/Policy Production | currently use for each of the following: | Accounting | |
|----|---|--|-------------|--|
| G. | . Does your Agency own or maintain a title pla If yes, please provide a brief description of o | | | |
| H. | . Title search and exam services are performed In-House List all third-party search vendors: | ed: (select all that apply): Third-Party Vendor | Underwriter | |
| l. | If your agency has multiple locations, is your search and exam centralized? | | | |
| | If no, please explain the process: | | | |
| J. | If your agency has multiple locations, is you If yes, please list location or service compan | | 0 | |





| IV. Claims Information | | | | | |
|--|---|------------------------------|-----------------------------|-------------------------|--|
| A. Have you been notified of any title losses/claims by underwriters, agencies/firms? | | | | | |
| If yes, please explain and in | If yes, please explain and include the claim type, name of underwriter, date of claim, and amount paid: | | | | |
| Occurred in the Past | # of Claims | Amount Paid | Underwriter | Claim Type | |
| 1 year | | | | | |
| 3 years | | | | | |
| 5+ years | | | | | |
| B. Does the agency/firm have any title insurance claims pending? | | | | | |
| V. Best Practices Assessment Does your Agency have documented ALTA Best Practices addresing the ALTA Pillars (as listed below) and documented wire transfer controls? Yes No If yes, please attach your documented procedures inclusive of wire transfer controls and proceed to page 7. | | | | | |
| If no, please complete all the sections below and the Essent Title Wire Transfer Procedure Questionnaire. | | | | | |
| Pillar 1: Licensing Does your Agency maintain written procedures for current licensures as required to conduct business of title insurance and settlement services? Yes No | | | | | |
| If yes, please provide. If no, please describe your procedures: | | | | | |
| Pillar 2: Escrow Accounts | | | | | |
| Does your Agency maintain w reconciliation? Yes | rritten procedures a No | nd controls for escrow trust | accounts, allowing for elec | ctronic verification of | |
| If yes, please provide. If no, please describe procedures: | | | | | |
| | | | | | |

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| Who is responsible for reconciling, monitoring, and reviewing the escrow bank account(s)? What is the frequency of this review (daily/monthly)? Are these procedures documented? Please describe your procedures: | | |
|---|--|--|
| | | |
| Does your Agency maintain written procedures and controls allowing only designated personnel to authorize bank transactions? Does your Agency ensure background checks are obtained and reviewed during the hiring process and at least every three years thereafter for personnel authorized to perform bank transactions? | | |
| If yes, please provide. If no, please describe your procedures: | | |
| Pillar 3: Information Security | | |
| Does your Agency maintain written policies and procedures to protect non-public information (NPI) including requiring third parties to protect NPI? Yes No | | |
| If yes, please provide. If no, please describe your privacy policies: | | |
| Does your Agency maintain a written information security plan (WISP)? | | |
| If yes, please provide. If no, please describe your information security protocols: | | |
| Pillar 4 - Settlement Policies and Procedures | | |
| Does your Agency maintain written policies and procedures regarding regular employee training related to settlement services, premium calculation, document execution, and timely recording of legal documents? | | |
| If yes, please provide. If no, please describe your policies: | | |
| | | |
| | | |

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| Does your Agency maintain written policies and procedures regarding the oversight of signing professionals and the selection of renotarization platforms? Yes No If yes, please provide. If no, please describe: | | |
|---|--|--|
| | | |
| Pillar 5: Policy Production, Delivery, Reporting and Remittance Procedures | | |
| Does your Agency have a written process to evaluate third-party production vendors? | | |
| If yes, please provide. If no, please describe: | | |
| | | |
| Does your Agency maintain written procedures to ensure policy delivery, policy reporting, and premium remittance are timely? Yes No | | |
| If yes, please provide. If no, please describe: | | |
| | | |
| Pillar 6: Insurance Coverages | | |
| Does your Agency have written policies and procedures for maintaining appropriate professional liability insurance and bond coverage? Yes No | | |
| If yes, please provide. If no, please describe: | | |
| | | |
| Pillar 7: Consumer Complaints | | |
| Does your Agency have written procedures for resolving consumer complaints? | | |
| If yes, please provide. If no, please describe: | | |
| | | |
| | | |



VI. Additional Documentation

Please provide all the following with this application:

- Individual credit application(s)
- 2. Resumes and bios (senior management and ownership)
- 3. Three months of escrow reconciliations
- 4. Wire Transfer Procedure Questionnaire (if not specifically addressed in policies and procedures)
- 5. Organizational chart
- 6. Appropriate producer licenses (entity and individual)
- 7. E&O insurance policy
- 8. Financial statements covering the last 12 months or most recent tax return
- 9. Fidelity/surety, cyber, crime bond policy
- 10. Corporate documents: articles of incorporation and/or operating agreement
- 11. Affiliated Business Addendum (if applicable)
- 12. BDA and branch office names and addresses

NOTE: If your Agency is a startup, please provide a written business plan, escrow signature card(s), and pro forma financial statements.

Submitted by Agency's Authorized Principal:

| Signature: | Print: |
|------------|--------|
| | |
| | |
| Tilte: | Date: |