

**EQUITY PROTECTION PROGRAM LENDER QUESTIONNAIRE**



13121 EASTPOINT PARK BLVD, SUITE C • LOUISVILLE, KY 40223 • 502-245-1300 • FAX 502-245-1347

**PRODUCER INFORMATION**

Producer Name : GARY CRISCILLIS      Producer Company: LENDERS SERVICE CORPORATION

**LENDER INFORMATION**

Lender Name:		
Address:	ST:	Zip:
Phone:	E-mail:	Asset Size:
Home Equity Manager:	Direct Phone #	
Underwriting Manager:	Direct Phone #	
Collection Manager:	Direct Phone #	
Reporting Manager:	Direct Phone #	

**LENDER LOAN PRODUCT INFORMATION**

1. How long has the lender been making equity/property improvement loans?
2. What geographic area does the lender serve?
3. Does the lender originate all loans or utilize a third party originator?
4. Are your Collectors dedicated "Home Equity Specialists"?
5. The anticipated insured loan volume during next 12 months will be approximately \$\_\_\_\_\_ (Most lenders experience a 15-30% lift in Home Equity volume with expanded criteria & advertising.)

**LENDER COMMENTS**

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**IMPORTANT:** Please include along with this application, a copy of the Collection Procedures and Subordination Process to be used for the insured loan program.

Submitted by \_\_\_\_\_  
(Please Print Name)

Title \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

REQUIRED DISCLOSURE: Any person who knowingly and with intent to defraud any insurance company or other person, files an application for insurance containing any materially false information or conceals, for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime.