

Repay / Forbearance Form

Loan Information

Servicer Name and Address:	Borrower Name(s) and Property Address:
Enact Organization #:	Enact Certificate #:

Current Loan Status

Lender Loan Number	
Loan Due Date	
Current Monthly Payment Amount	
Current UPB	
Reinstatement Amount	

Repay / Forbearance Terms

Planned Start Date	
Expected Monthly Payment Amount	
Expected Term (in months)	
Planned End Date	

Hardship Reason

Briefly explain the Borrower's Hardship:	
--	--

Borrower(s) Financials

Total Gross Monthly Income	
Total Net Monthly Income	
Total Monthly Expenses	

Signatures Required

Requestor's Printed Name	Requestor's Title	Telephone Number
Requestor's Signature	Requestor's Email Address	Requestor's Fax Number

Please email form to: hoa@EnactMI.com or fax to: 800-944-3642

All documents should be sent via secure methods. Please contact our ActionCenter® at 800-444-5664 if you have any questions.

Enact Mortgage Insurance
8325 Six Forks Road Raleigh, North Carolina 27615
919-846-4100, 800-455-0871
enactmi.com

10869594.0222

Enact mortgage insurers include Enact Mortgage Insurance Corporation and Enact Mortgage Insurance Corporation of North Carolina.

© 2022 Enact Holdings, Inc. All rights reserved.

