



Office of Insurance Regulation
Bureau of Property & Casualty Forms and Rates

MORTGAGE GUARANTY INSURANCE REPORTING FORM

COMPANY NAME: _____

LINE OF BUSINESS: MORTGAGE GUARANTY

Complete a separate report for each six month calendar period beginning January 1, and July 1 of each year. Reports are due September 1 and March 1 respectively for the six calendar months indicated above.

Part I (Florida Business Only)

- 1. a) Direct Premiums Written (New) \$ _____ % E.P. _____
- b) Direct Premiums Written (Renewal) \$ _____ % E.P. _____
- 2. Direct Premiums Earned \$ _____ % E.P. _____
- 3. Direct Losses Incurred \$ _____ % E.P. _____
- 4. LAE Incurred \$ _____ % E.P. _____
- 5. Loss & LAE Incurred
(3 + 4) \$ _____ % E.P. _____
- 6. Comm. & Brokerage Incurred \$ _____ % E.P. _____
- 7. Other Acq., Field Supv.,
etc. Incurred \$ _____ % E.P. _____
- 8. General Expenses Incurred \$ _____ % E.P. _____
- 9. Taxes, Licenses, Fees Incurred \$ _____ % E.P. _____
- 10. Total Underwriting Expenses
Incurred (6 + 7 + 8 + 9) \$ _____ % E.P. _____
- 11. Underwriting Gain or Loss
(2 - 5 - 10) \$ _____ % E.P. _____
- 12. Investment Gain or Loss and
Other Income \$ _____ % E.P. _____
- 13. Dividends to Policyholders \$ _____ % E.P. _____
- 14. Income Before Federal and
Foreign Tax (11 + 12 - 13) \$ _____ % E.P. _____
- 15. Contribution to Contingency
Reserve \$ _____ % E.P. _____

Part II (Countrywide Business Only)

- 1. Outstanding Total Liability
Net of Reinsurance \$ _____
- 2. Paid in Capital \$ _____
- 3. Surplus \$ _____
- 4. Contingency Reserve \$ _____
- 5. Total (2 + 3 + 4) \$ _____
- 6. Line 1 Line 5 \$ _____
- 7. Maximum amount of risk retained
pertaining to any one subject of
Insurance (after reinsurance) \$ _____

PERSON TO CONTACT: _____

TELEPHONE: _____