

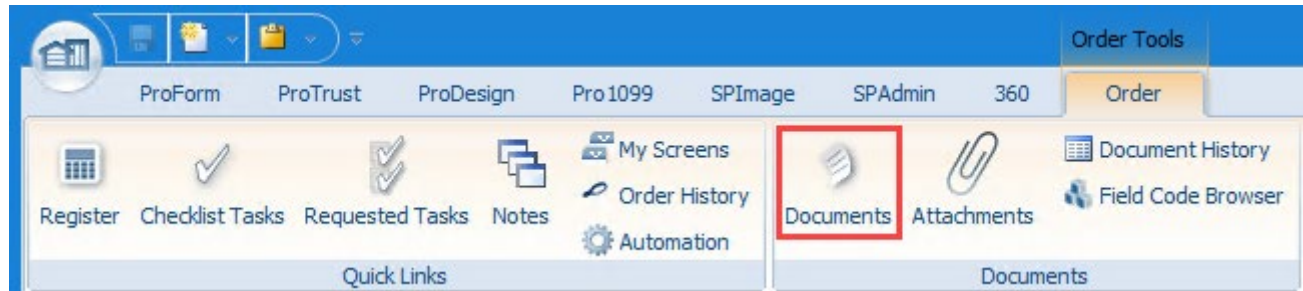
# SoftPro Select– Overlimit Approval Request

Follow these steps to create an Overlimit Approval Request in SoftPro Select.

**Important: Email address for Policy Approval, [Policyapprovalrequest@stewart.com](mailto:Policyapprovalrequest@stewart.com), must be saved as an *Order Contacts* in individual file to use for email option.**

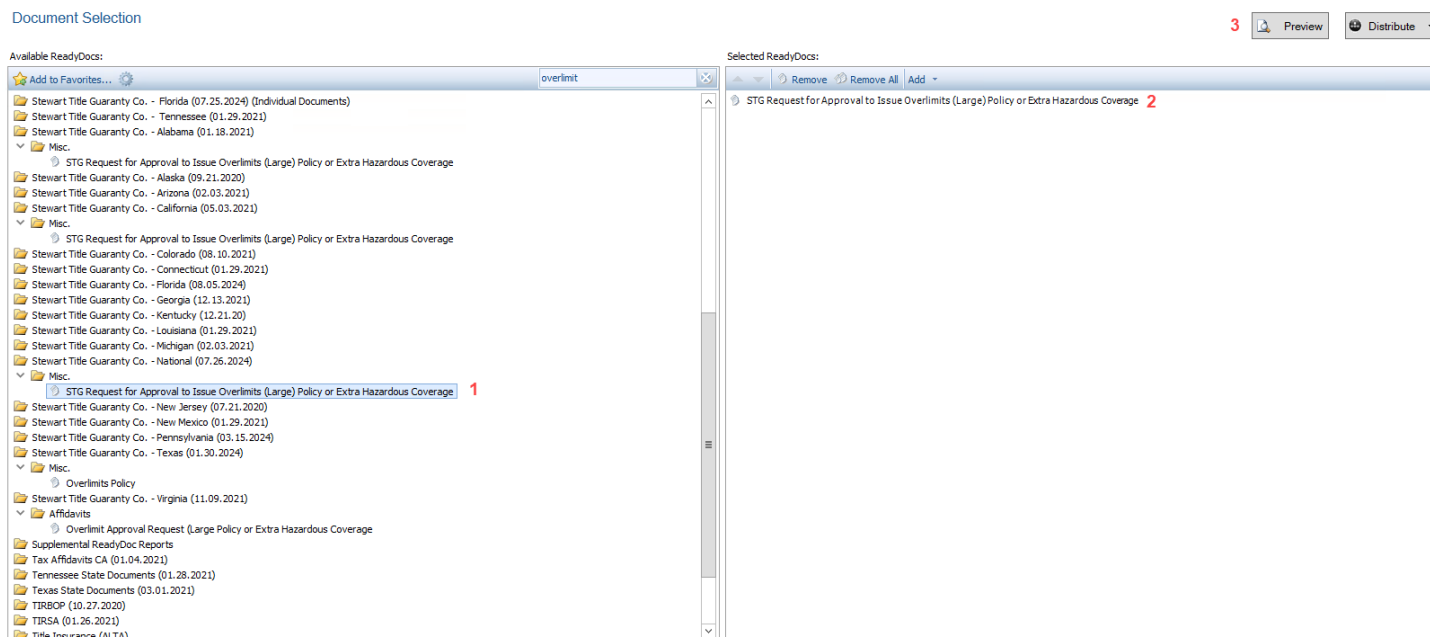
## Steps

1. In SoftPro Select file, within the **Order** tab select **Documents**:



In the displayed Document Selection list,

1. Locate STG Request for Approval to Issue Overlimits (Large) Policy or Extra Hazardous Coverage.
2. Double click the document to add to the Selected ReadyDocs section.
3. Select Preview to complete additional fields and review information added to Overlimit request.



## SoftPro Select– Overlimit Approval Request

2. The following are example prompts encountered while filling out the form. Enter the information as prompted. This information is then displayed on the Overlimits Approval form:

Examples:

**Field Prompt** x

**STG Request for Approval to Issue Overlimits (Large) Policy or Extra Hazardous Coverage**

Commitment

Description of Property (e.g., undeveloped, apartments, offices, etc.)

This is my description of the property

☐ Skip remaining prompts OK

**Field Prompt** x

**STG Request for Approval to Issue Overlimits (Large) Policy or Extra Hazardous Coverage**

Commitment

Describe transaction and purpose of financing:

This is a description of the transaction and financing

☐ Skip remaining prompts OK

**Field Prompt** x

**STG Request for Approval to Issue Overlimits (Large) Policy or Extra Hazardous Coverage**

Commitment

Title was searched and examined from:

(None)

October 2025

| Sun | Mon | Tue | Wed | Thu | Fri | Sat |
|-----|-----|-----|-----|-----|-----|-----|
| 28  | 29  | 30  | 1   | 2   | 3   | 4   |
| 5   | 6   | 7   | 8   | 9   | 10  | 11  |
| 12  | 13  | 14  | 15  | 16  | 17  | 18  |
| 19  | 20  | 21  | 22  | 23  | 24  | 25  |
| 26  | 27  | 28  | 29  | 30  | 31  | 1   |
| 2   | 3   | 4   | 5   | 6   | 7   | 8   |

Today: 10/8/2025

☐ Skip remaining prompts OK

**Field Prompt** x

**STG Request for Approval to Issue Overlimits (Large) Policy or Extra Hazardous Coverage**

Commitment

Starter, if any. Please specify and include a copy:

Yes

No

Yes

☐ Skip remaining prompts OK

**Field Prompt** x

**STG Request for Approval to Issue Overlimits (Large) Policy or Extra Hazardous Coverage**

Commitment

Prior Over Limits Approval No. (if needed):

☐ Skip remaining prompts OK

**Field Prompt** x

**STG Request for Approval to Issue Overlimits (Large) Policy or Extra Hazardous Coverage**

Commitment

Describe grantor/mortgagor (e.g., person, entity) and authority:

Grantor description and their authority

☐ Skip remaining prompts OK

# SoftPro Select– Overlimit Approval Request

Field Prompt

STG Request for Approval to Issue Overlimits (Large) Policy or Extra Hazardous Covera  
Commitment

Commitment

CPL Date (if requesting):  
(None)

October 2025

|     |     |     |     |     |     |     |
|-----|-----|-----|-----|-----|-----|-----|
| Sun | Mon | Tue | Wed | Thu | Fri | Sat |
| 28  | 29  | 30  | 1   | 2   | 3   | 4   |
| 5   | 6   | 7   | 8   | 9   | 10  | 11  |
| 12  | 13  | 14  | 15  | 16  | 17  | 18  |
| 19  | 20  | 21  | 22  | 23  | 24  | 25  |
| 26  | 27  | 28  | 29  | 30  | 31  | 1   |
| 2   | 3   | 4   | 5   | 6   | 7   | 8   |

Today: 10/8/2025

OK

Field Prompt

STG Request for Approval to Issue Overlimits (Large) Policy or Extra Hazardous Covera  
Commitment

Commitment

CPL Limit (if requesting):  
\$1,000,000.00

☐ Skip remaining prompts

OK

Field Prompt

STG Request for Approval to Issue Overlimits (Large) Policy or Extra Hazardous Covera  
Commitment

Commitment

Email of person requesting the CPL:  
jmoroni@stewart.com

☐ Skip remaining prompts

OK

Field Prompt

STG Request for Approval to Issue Overlimits (Large) Policy or Extra Hazardous Covera  
Commitment

Commitment

Addressee/Covered Party of CPL:  
Buyer  
Lender  
Seller

☐ Skip remaining prompts

OK

## SoftPro Select– Overlimit Approval Request

3. The Overlimits Approval Form will generate with information pulled from file and information entered in pop-up's that appeared. Selecting fields in form will navigate to sections in the file to enter missing information or re-generate pop-ups to add or correct information:

Example:

  
**Request for Approval to Issue Over Limits (Large) Policy or Extra Hazardous Coverage [Rev 01-07-22]**  
Please complete this form and email it to [PolicyApproval@stewart.com](mailto:PolicyApproval@stewart.com) and copy your underwriting contact, if applicable.

Date: October 8, 2025 Name of Person Requesting Approval: [Redacted]  
Telephone No.: [Redacted] Email Address: [Redacted]  
Agency Name: [Redacted] Stewart/ALTA ID: [Redacted]  
Agency Address: [Redacted] File No.: FL-121523JMFLP  
City: [Redacted] State: [Redacted] ZIP: [Redacted]

Subject Property Address: (If an address is not available, please include City, or County, State and ZIP)  
7604 NW 42nd Ct.  
City: Coral Springs State: FL ZIP: 33065 Anticipated Closing Date: April 7, 2023  
Subject Property Address: (If an address is not available, please include City, or County, State and ZIP)  
8269 NW 15th Court  
City: Coral Springs State: FL ZIP: 33071 Anticipated Closing Date: April 7, 2023  
Subject Property Address: (If an address is not available, please include City, or County, State and ZIP)  
4961 NW 115th Terrace  
City: Coral Springs State: FL ZIP: 33075-3201 Anticipated Closing Date: April 7, 2023  
Subject Property Address: (If an address is not available, please include City, or County, State and ZIP)  
8016 NW 43rd Street  
City: Coral Springs State: FL ZIP: 33065 Anticipated Closing Date: April 7, 2023  
Project Name/Project Reference ("Re"): if applicable: Purchase

1. List the Policy Form(s), Type, Insured and Stewart's Policy Amount.  
**THIS SECTION IS REQUIRED.** Please do not leave it blank. If a Policy Form is not identified, the form will be the 2021 ALTA Policy. Attach a copy of Commitment(s), Preliminary Report(s) and any Pro Forma(s).

| Policy Form (e.g., 2006/2021 ALTA)  | Type (e.g., Loan/Owners) | Proposed Insured                                                                                                                                                                                                                                                                                                                   | Amount       |
|-------------------------------------|--------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| <input checked="" type="checkbox"/> | Loan Policy              | Wells Fargo Capital Finance, LLC, FKA Wells Fargo Foothill, LLC, successor to Wells Fargo Foothill, Inc. TEST COMMIT and each successor in ownership of the indebtedness secured by the insured mortgage, except a successor who is an obligor under the provisions of Section 12(c) of the conditions and stipulations COMMITMENT | \$412,390.27 |
| <input checked="" type="checkbox"/> | Owner's Policy           | Santa W. Clause and Lady S. Clause                                                                                                                                                                                                                                                                                                 | \$399,900.99 |

2. Description of the Property (e.g., undeveloped, apartments, offices, etc.):  
This is my description of the property

3. Describe: (a) transaction and (b) purpose of financing (briefly, but in detail):  
This is a description of the transaction and financing

4. Title was searched and examined from October 8, 2025 to [Redacted]

5. Starter, if any. Please specify and include a copy. ☒ Yes ☐ No

Revised 01.07.22  
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FL-121523JMFLP

  
6. If this property was the subject of a prior Over Limits Approval, please insert the prior approval No.:  
123456

7. Describe grantor/mortgagor (e.g., person, entity) and authority (e.g., power of attorney, corporate resolution, etc.):  
[Redacted]

8. Grantor description and their authority  
Please select any of the following that apply to this transaction (anything left unchecked will represent "does not apply"):  
☐ A construction loan  
☐ Broken-priority (e.g., early start) or no-priority. If YES, please describe in a supplement.  
☐ Recent construction performed or completed within the lien period. If YES, please describe in a supplement.  
☐ Request for Mechanic's Lien Coverage? NOTE: If this transaction is a construction loan and if the total project cost (i.e. the loan amount plus other contributions) is equal to or greater than \$40,000,000, please also complete [STG High Liability \(Over \\$40 Million\) Mechanic's Lien Coverage Approval Request](#)  
☐ Title based upon judicial proceedings (e.g., tax foreclosure, condemnation, bankruptcy)  
☐ Title based upon foreclosure or deed in lieu of foreclosure  
☐ Mineral coverage on commercial property in area of mineral development  
☐ Title derived from foreclosure or deed in lieu of foreclosure regarding a construction loan deed of trust, within the last three years  
☐ Easement independent of real property (e.g., an easement in gross)  
☐ Insured Option  
☐ Native American (Indian) lands  
☐ Insuring Water Rights  
☐ Sheriff's Sale, Tax Sale or Receivership Sale in last 10 years (other than mortgage foreclosure)  
☐ Insuring a lease and/or a mortgage encumbering a lease. If YES, please attach a copy of the lease and describe consents/estoppels in a supplement.  
☐ Assignment or partial assignment or mortgage of a lease, easement, or other interest. If YES, describe consents/approvals to be obtained in a supplement.  
☐ Any purchase contract(s) or option(s) outstanding including right of first refusal, right of first offer, other than the purchase contract in favor of the proposed insured.  
☐ Other extra hazardous risks, such as those shown in [VU Underwriting Manual Section 5.36](#)  
☐ Current, recent or impending litigation that might affect the subject property  
☐ A transaction that, to your knowledge, has been turned down by another Underwriter  
☐ An energy project (e.g., wind, solar, geothermal, hydro, etc., including conventional) and/or any energy endorsement(s)  
☐ Other unusual risks, issues and/or affirmative coverages, if any. If YES, please describe in a supplement.  
☐ Co-insurance? If YES, please list the co-insurers and their liability amounts/percentages

If "YES" to any of the above, please describe below or in a supplement.

9. This policy will be issued by (MUST be completed):  
☐ an issuing agent authorized in the state, in compliance with state law; or  
☐ direct issue/home office, in compliance with state law

From our examination of the Title and the foregoing, we are of the opinion that the requested Policy complies with Company Guidelines, including, but not limited to, those on Virtual Underwriter®, and can be safely issued in compliance with state law, including any requirements relating to authorized and licensed signatories on the Policy.  
The requested coverages and endorsements are allowed to be issued in the state, and the rates to be charged will comply with state requirements, and the amount to be remitted to Stewart will comply with our underwriter agreement(s).

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Signature \_\_\_\_\_ Date \_\_\_\_\_  
You **MUST** receive the email approval from STG Underwriting before proceeding.  
If endorsements and/or affirmative/express insurance are requested, please insert below or attach a list.

[Redacted]

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FL-121523JMFLP

  
**Request for Closing Protection Letter/Insured Closing Letter (CPL/ICL)**  
If you require a CPL that exceeds the standard coverage limit, please complete the information below and submit the complete form, including all pages, to [stgcontractadministration@stewart.com](mailto:stgcontractadministration@stewart.com).

CPL Date: October 16, 2025 CPL Limit: \$1,000,000.00 Email: jmoroni@stewart.com  
Addressee/Covered Party: (a CPL will be issued for each type of party selected below. Buyer/Borrower is required if Lender Addressee)  
☒ Lender ☐ Buyer ☐ Seller

| Buyer/Borrower/Lessee |                                           | Seller |
|-----------------------|-------------------------------------------|--------|
| Name:                 | <u>Santa W. Clause and Lady S. Clause</u> |        |
| Address:              | <u>322 N President Avenue</u>             |        |
| City, State, Zip:     | <u>Coral Springs, FL 33065</u>            |        |

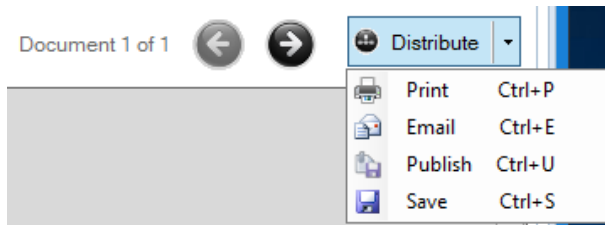
| Primary Lender                                    |                                                                                                                 | Secondary Lender                                         |
|---------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| Name:                                             | <u>Wells Fargo Capital Finance, LLC, FKA Wells Fargo Foothill, LLC, successor to Wells Fargo Foothill, Inc.</u> |                                                          |
| Include "Its Successors and/or Assigns" Language: | <input type="checkbox"/> Yes <input type="checkbox"/> No                                                        | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Address:                                          | <u>1055 10th Avenue SE</u>                                                                                      |                                                          |
| City, State, Zip:                                 | <u>Minneapolis, MN 55414-1312</u>                                                                               |                                                          |
| Loan No.:                                         | <u>987654321112</u>                                                                                             |                                                          |
| Lender Attention To:                              | <u>[Redacted]</u>                                                                                               |                                                          |

Closing/Settlement Office: (enter ONLY if this office needs to appear on the CPL and is different from the Agency referenced on page 1)  
Name: [Redacted] Stewart/ALTA ID: [Redacted]  
Address: [Redacted] File No.: FL-121523JMFLP  
City: [Redacted] State: [Redacted] ZIP: [Redacted]

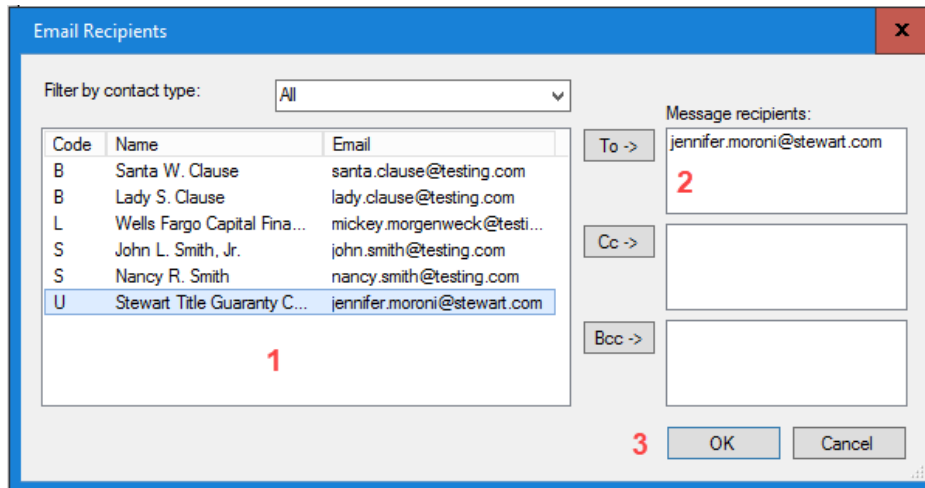
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## SoftPro Select– Overlimit Approval Request

4. Click the Distribute option in the top right of the form to share the completed form:
  - **Print:** Print form to printer or PDF.
  - **Email:** Must have email program installed on computer to generate email.
  - **Publish:** Select to add completed form to file attachments.
  - **Save:** Select to save completed form to computer.

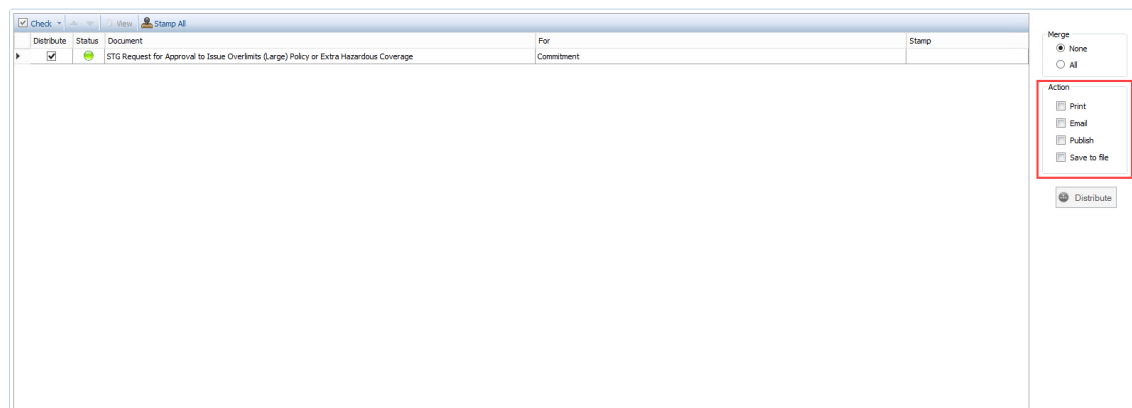


5. If email is selected a pop-up will appear to:
  1. Select from *Order Contacts* that have been added to file.
  2. Select contact and then *To*, *Cc* or *Bcc* to include email address.
  3. Select *OK* to generate email with local email program installed on computer.



### Document Distribution

Documents will be distributed in the order shown



Finished?