



APPLICATION FOR INSURANCE POLICY OF PROPERTY OWNERSHIP FOR CORPORATIONS

(Application must be fully completed and legible or the application will not be accepted.)

Stewart Title Guaranty de México, S.A. de C.V.

www.stewart.com/mexico

General Information: Full Name (Proposed Insured): Address of Principal Residence (Number and Street Name): City: State: ZIP Code: Country: Email: Telephone (with area code): Cell Phone: Nationality/Citizenship: Type of Applicant or Proposed Insured: Corporation Trust Lender Other (Identify): Applicant Information (Name If Different from the Proposed Insured): Describe Current Transaction and Source of Funds for Transaction: (Professional/Personal/Commercial): R.F.C.: FIEL: Contact Information of Legal Representative: Name: Billing Address: City: Zip Code: State: R.F.C.: CURP: Email: Phone (With Area Code): Mobile Phone: Please indicate if you or any member of your family are currently or have ever been a municipal, state or federal government employee or appointed or elected to an official government position. Yes__ or No__. If so, please include a brief description of such position, including the date and period of employment or official position, country and title of such position:

1. Proposed Policy (ies): Owner Purchase Price: \$ USD or M.N. Lender Loan Amount: \$ USD or M.N.

2. Will you be requesting additional insurance? If so, what is the reason for the additional amount (i.e., for contemplated improvements)? If so, please list the total amount of insurance being requested. Amount of Insurance: \$

3. Name/Legal Name of Entity of the Current Owner of the realty (Seller): (Please provide a copy of the public document of current ownership & owner's contact information (e.g., deed, trust).

4. Brief Legal Description of realty to Be Insured: located in (City/State): (Lot/Parcel/Private Unit): ; (Block/Condominium):

5. Current Use of the realty to Be Insured: Residential Commercial Industrial Other:

6. Please indicate if the realty is rustic or urban, improved or unimproved. If improved, briefly describe which improvements are located on the realty. If unimproved, describe any proposed improvements to be made on the realty:

7. Current Party in Possession of Realty:

8. Describe the Transaction: Purchase and Sale Agreement Trust Mortgage Other:

9. Do you have a survey of the realty? Yes or No. If so, please attach.

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10. Do you have evidence of payment of taxes and charges against the realty? Yes or No. If so, please attach.
11. Do you have knowledge and/or evidence of any lawsuits pending against the realty? If so, please describe and include any information related thereto: _____
12. Is there a prior title opinion and/or title insurance policy on the realty? Yes or No. If so, please attach.
13. Please provide any other material information related to the realty (e.g., easements, agrarian/ejido land, expropriation, rights of other parties, access issues). _____
14. Proposed Closing Date: _____
15. Please provide the name of the public notary or corredor closing the transaction and his/her contact information, including address, phone, fax and email: _____
16. Please indicate how you learned about our company (e.g., referral, phone, fax, internet).

17. The Applicant hereby agrees to receive contractual documentation related to this insurance product electronically to the email address provided in this application: Yes___ No___

THIS DOCUMENT IS ONLY AN INSURANCE APPLICATION FORM AND THEREFORE, DOES NOT MAKE ANY GUARANTY THAT IT WILL BE ACCEPTED BY THE INSTITUTION OF INSURANCE OR, THAT IN THE CASE OF ACCEPTANCE, DOES NOT REPRESENT THAT THE ACCEPTANCE MEETS THE CONDITIONS OF THE APPLICATION.

Please sign and email this application to: MEXICOPROPERTIES@STEWART.COM along with copies of the following documents, which were duly compared with the original documents during the interview:

CORPORATE DOCUMENTS:

1. Application completed and signed.
2. Current deed of record for the realty, including recording information.
3. Copy of Corporate Documents, Certificate of Good Standing, Articles of Incorporation, and any other legal document granting legal authority and/or relating to the incorporation of the corporation, for foreign corporations of the Proposed Insured. **For Mexican corporations:** a copy of the public deed duly registered before the Public Registry of Commerce and any other legal document granting legal authority and/or relating to the incorporation of the corporation of the Proposed Insured.
4. Copy of the RFC and Serial Number for Advanced Digital Electronic Signature for Mexican Corporations.
5. Proof of address of the corporation (utility or phone bill).
6. Proof of Payment of the application and investigation fee.

LEGAL REPRESENTATIVE:

1. ID (driver's license, passport and/or Mexican FM-T, 2 or 3.)
2. In case the legal representative is a Mexican Citizen, copy of its CURP and RFC.
3. Power of Attorney of the legal representative.

ANY POLICY, IF ANY IS ISSUED, IS SUBJECT TO COMPLIANCE WITH UNDERWRITING REQUIREMENTS OF STEWART TITLE GUARANTY DE MEXICO, S.A. DE C.V.

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IMPORTANT FOR THE APPLICANT

In accordance with articles 8 and 47 of the [Law of Insurance Contract](#), the Applicant signing this application declares all relevant and important facts for risk assessment in connection with this application, as known, or should be known are true and correct. The Applicant acknowledges that non-disclosure, omission, any inaccurate or false statements could result in the loss of rights of the Insured.

In accordance with article [492 of the Law of Insurance and Bonds Institutions](#), the Applicant declares: "The origin and source of the funds are maintained in the Applicant's own account or in representation thereof and are legal. The Applicant also declares that the information and documentation provided in this application are true, and Applicant has provided photocopies of the documents and identification, the Applicant expressly authorizes Stewart Title Guaranty de Mexico S.A. de C.V., or any affiliate, subsidiary or parent Company thereof, (Stewart) to confirm the information provided herein, if necessary. The Applicant expressly authorizes Stewart to use the information provided herein if an agreement is entered into related to any product or service and with the purpose of establishing a business relationship with Stewart. The authorization granted by the Applicant does not imply consent for the use of this information by third parties other than Stewart and/or any agent or service provider of Stewart. The Applicant declares that he/she has not provided consent or the consent of Applicant's representative to negotiate or transact for any products, accounts, contracts or services related to or originating out of illegal sources or activities." The Applicant declares that this application was completed in the country of: _____ and I have attached a copy of the legal migratory forms, if completed in Mexico.

Stewart assumes no liability for, and the Applicant hereby agrees to hold Stewart harmless for any loss the Insured may sustain, if any, as a result of any inaccuracies, errors or omissions in any translation provided by Stewart to the Applicant. Please be advised that legal terms or any other terms of art may not have a literal English translation, and, therefore, the translation should not be relied upon. In the event any claim, controversy and/or dispute arises and there is some conflict between the Spanish and English version, the Spanish version shall control, unless otherwise agreed to in writing by the Applicant and Stewart.

Date: _____ Premium Quote: \$ _____ /1,000 Signature of Applicant(s): _____

Any question, clarification, complaint or notice of claims may be directed to the Company, Attention: Special Unit ("UNE") in writing in accordance with the terms and conditions of the policy to the following address: Río Duero 31, Col. Cuauhtémoc, 06500, Mexico City or by telephone (+0155) 52420756, hours of operation: Monday to Friday 8:00 a.m. – 5:00 p.m., or e-mail at jimena.acosta@ecrubio.com. You can also contact the National Commission for Protection and Defense of Financial Services Users (CONDUSEF) by telephone 555340-0999 or toll free 01800-999-8080, e-mail asesoria@condusef.gob.mx and/or to the following address: Insurgentes Sur 762, Del Valle, 03100, México City, or at www.condusef.gob.mx.

Refer to your policy for specific coverages, limitations and exclusions. A sample copy of a policy can be downloaded at www.stewart.com/mexico or by clicking [here](#). Any law referenced in this Application or policy can be found at <http://www.diputados.gob.mx/LeyesBiblio/index.htm>. Please also find a list of the Insured's Basic Rights at www.stewart.com/mexico or by clicking [here](#) and a copy of the Privacy Policy by clicking [here](#).

In compliance with the provisions of article 202 of the Law of Insurance and Bonds Institutions, the contractual documentation and the technical note that make up this insurance product were registered with the National Commission of Insurance and Bonds, from the day of November 7, 2022, with the number CNSF-S0070-0367-2022/CONDUSEF-005602-01 (Owner's) and as of October 13, 2022, with number CNSF-S0070-0435-2022/CONDUSEF-005671-01 (Lender's).