

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

Please complete this form, sign it and email the completed form to PolicyApprovalRequest@stewart.com with a copy to your underwriting contact, if applicable.

To: Stewart Title Guaranty Company Date: _____

From: _____
[Name of person requesting approval]

[Full name of title insurance agent/company/issuing office/division requesting approval]

[Location/address of requesting office. Please also include city and state.]

Your Telephone: _____

Your Email: _____

Your Fax: _____

Your Stewart Agent ID number, if applicable: _____

Title/File/Order No. _____

Subject Property Address: _____

[If an address is not available, please include city or county, state and ZIP code]

Project Name/Project Reference/Project Designation ("Re:"), if applicable:

Anticipated closing date, if known: _____

1. Premium. Please specify: (MUST ONLY BE COMPLETED FOR TRANSACTIONS OVER \$100,000,000.00)

- _____ (a) Total premium charge to customer for title insurance policies (excluding endorsements);
- _____ (b) Amount of premium for title insurance policies (excluding endorsements) that will be remitted to Stewart Title Guaranty Company;
- _____ (c) Total premium charge to customer for endorsements;
- _____ (d) Amount of premium for endorsements that will be remitted to Stewart Title Guaranty Company;
- _____ (e) Total Amount of premium for title insurance policies and endorsements that will be remitted to Stewart Title Guaranty Company;
- _____ (f) \$ per thousand premium charge to customer for title insurance policies and endorsements;
- _____ (g) \$ per thousand remitted to Stewart Title Guaranty Company for title insurance policies and endorsements.

2. Title was searched and examined from _____ to _____.
[Please do not include the period covered by any Starter.]

3A. Starter, if any. Please specify: (a) Prior Company: _____

(b) Prior Effective Date: _____

(c) Owner's Policy or Loan Policy (check one). Please attach a copy of the Starter.

3B. If this property was the subject of a prior overlimits approval, please insert the prior approval number: _____ .

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4. List the Policy Form(s), Type, Insured and Stewart's Policy amount.
If Policy Form not identified, the form will be the 2006 ALTA Policy. Attach a copy of Commitment(s) and any pro forma(s).

Policy Form (e.g., 2006 ALTA)	Type (e.g., Loan)	Proposed Insured	Amount
			\$
			\$
			\$
			\$

5. Description of Property (e.g., undeveloped, apartments, offices, etc.):
6. Describe: (a) transaction and (b) purpose of financing (briefly, but in detail):
7. Describe grantor/mortgagor (e.g., person, entity) and authority (e.g., power of attorney, corporate resolution, approval by shareholders, partners or members, etc.):
- 8A. Describe any conflict of interest or potential conflict of interest. A blank will be deemed **"NONE"**:
- 8B. If the Issuing Office is an agent, please provide the names of all officers of the agent and all principals of the agent that own 10% or more of the agent. A blank will be deemed **"NONE"**:
9. If endorsements are being requested, attach a list or click below:
- [ALTA Endorsement List Supplement](#)
[CLTA Endorsement List Supplement](#)
[Louisiana Endorsement List Supplement](#)
[Pennsylvania Endorsement List Supplement](#)
[Texas Endorsement List Supplement](#)
10. Does this file involve the following? (If applicable, write **"YES"** and describe the circumstances.
Please note: a blank will be deemed **"NO"**):

_____ A construction loan?

_____ Broken-priority (e.g., early start) or no-priority? If so, please describe underwriting: _____

NOTE: If no broken-priority, please explain:

_____ Recent construction performed or completed within the lien period? If so, please describe underwriting:

_____ If not, how do you know? _____

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- _____ 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 greater than \$30,000,000, please also complete [STG High Liability \(Over \\$30 Million\) Mechanic's Lien Coverage Approval Request](#);
- _____ Access based solely upon an easement (i.e., Is there no direct access to a dedicated public street)? If so, was title to the access easement examined and insured? _____
- _____ Lien priority based upon subordination of a lien or mortgage; if so, please explain:
- _____ Tidelands, filled land, submerged land, navigable waters or riparian issues;
- _____ Insuring title to railroad property;
- _____ 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 (i.e., an easement in gross);
- _____ Insured option;
- _____ Native American (Indian) lands;
- _____ Water rights;
- _____ Sheriff's Sale in last 10 years (other than mortgage foreclosure);
- _____ Assignment or partial assignment or mortgage of a lease, easement, or other interest (if so, describe consents/approvals to be obtained): _____
- _____ Reliance upon an indemnity; if so, describe purpose and provide a copy;
- _____ Insuring around a recorded lien or encumbrance (e.g., by omitting, deleting or providing affirmative insurance);
- _____ Survey concerns (e.g., does the survey show any significant conflict or encroachment?);
- _____ Current owner out of possession of the property;
- _____ Commercial purchasers of fruits, vegetables, livestock, or poultry, or wholesalers or retailers of meat products. See Stewart Bulletin [SLS2014001](#) (UNDERWRITING – The Perishable Agricultural Commodities Act (PACA) and The Packers and Stockyards Act (PSA));
- _____ A hospital, medical facility, health research facility, teaching facility for health related fields, facility for individuals with intellectual disabilities, medical or nursing school. If so, please see [VU Underwriting Manual Section 8.12.](#);
- _____ 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 (If a construction loan, please also describe existing or future contracts for presales, e.g., homes or condo units, contract deposits, and if the construction mortgage will have priority over potential vendees liens, and if so, upon what basis);
- _____ 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; or
- _____ If a loan in the amount of \$10 Million or more, will it be disbursed in multiple disbursements?

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If "YES" to any of the above, please describe in the next section or by supplement.

11. Other unusual risks, issues and/or affirmative coverages, if any:

12. If this transaction involves co-insurance, list the co-insurers and their liability amounts/percentages:

13. This policy will be issued by (must be completed):

_____ (a) an issuing agent authorized in the state, in compliance with state law; or

_____ (b) direct issue/home office, in compliance with state law.

14. 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.

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 remitted to the Company complies with our underwriting agreements.

Signature: _____
Title Examiner/Chief Title Officer/Closer/Underwriter

Print Name: _____

Title: _____

IF THERE ARE ADDITIONAL MATERIAL FACTS OR SUBSTANTIVE CHANGES OF CIRCUMSTANCES, OR IF ADDITIONAL COVERAGES ARE REQUESTED, YOU MUST OBTAIN WRITTEN APPROVAL. A COPY OF THE COMMITMENT OR TITLE REPORT MUST BE ATTACHED.

This approval is NOT an approval for Reinsurance. If the Policy amount is \$100,000,000.00 or larger, contact our Reinsurance Department, even if Reinsurance is not required, so that the transaction may be properly reported to management.

This approval form must be signed by your State, District or Division Counsel, or other Underwriter before forwarding to a Senior Underwriter.

APPROVAL Re: Title/File/Order No. _____

Based upon the information given above, approval is hereby granted to issue the Policy as requested, subject to the following:

Issuance of policies and endorsements is subject to compliance with Underwriting Guidelines.

Underwriter/Associate Senior Underwriter

Date

Senior Underwriter

Date

Senior Underwriter

Date

Senior Underwriter

Date

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Please use this area if you need additional space.