

Print Form

Seller/Servicer Certification of Insurance Coverage

We make home possible™

| The information below is submitted as of | Delivery | Underwriting | Annual Certification |
|---|------------------|---------------------|----------------------|
| The requirements, coverage and/or deductibles at Consult the Freddie Mac Multifamily Seller/Service | | | |
| Seller/Servicer and Mortgage Information | | | |
| Seller/Servicer Name | | | |
| Seller/Servicer Number | | | |
| Seller/Servicer Loan Number | Freddie Mac Loa | an Number | |
| Seller/Servicer Contact Name | | | |
| Contact Telephone No. | Alternative Cont | act | |
| | - | | |
| Borrower and Insurance Information | | | |
| Borrower Name/Named Insured (In compliance with Section | on 31A.2(d)) | | |
| Other Borrowers | | | |
| Mortgagee/Additional Insured (In compliance with Section | 31A.2(e)) | | |
| Property Information | | | |
| Property Name | | | |
| Property Address | | | |
| Remarks | | | |
| Property Damage Information Property Damage (All-Risk or Cause of Loss - Sp | ecial Form) and | Liability Insurance | Carrior(s) |
| All Property Damage Insurance carrier(s) comply with Freddie Mac acceptable insurer requirements | Yes | No | Sarrier(s) |
| Remarks | • | | |
| | | | |

| Specific or Blanket Property Damage Insurance | |
|---|--|
| | Yes No |
| | |
| The Property is insured with a Blanket Insurance Policy | Yes No |
| Remarks | |
| | |
| | |
| Business Income/Rental Value | |
| Coverage complies | Coverage is provided in |
| Coverage is required, but does not comply | Primary property damage policy (specific or blanket) |
| Coverage is required, but is not provided | Separate policy |
| Number of Months Required: | See remarks below |
| · | |
| EPI Required: | |
| Remarks | |
| | |
| | |
| Wind Coverage | |
| Coverage complies | Coverage is provided in |
| Coverage is required, but does not comply | Primary property damage policy (specific or blanket) |
| Coverage is required, but is not provided | Separate policy & includes Business Income |
| No coverage is required | See remarks below |
| Demonto | |
| Remarks | |
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| | |
| Flood Insurance | |
| Coverage complies | Coverage is provided in |
| Coverage is required, but does not comply | NFIP flood policy/policies |
| Coverage is required, but is not provided | Primary property damage policy (specific or blanket) |
| No coverage is required | Separate policy & includes Business Income |
| Limit of Coverage accepted: \$ | See remarks below |
| Flood Zone: | |
| How many buildings (including each insurable improvement, whether habitable or not) are included in a SFHA? | |
| How many NFIP policies are in force? | |
| Remarks | |
| Tomans | |
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| Earthquake Insurance | | |
|--|--|--|
| Coverage complies | Coverage is provided in | |
| Coverage is required, but does not comply | Primary property damage policy (specific of blanket) | |
| Coverage is required, but is not provided | Separate policy & includes Business Income | |
| No coverage is required | See remarks below | |
| Limit of coverage accepted: \$ | Goo remarks below | |
| Property is in Seismic Risk Zone 3 or 4 | □ V □ Na | |
| · · | Yes No | |
| A Site Specific Seismic Report (SSSR) with a PML was completed | Yes No | |
| What is the PML %: | | |
| Remarks | | |
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| Boiler & Machinery Coverage | | |
| Coverage complies | Coverage is provided in | |
| Coverage is required, but does not comply | Primary property damage policy (specific or blanket) | |
| Coverage is required, but is not provided | Separate policy & includes Business Income | |
| There is no central HVAC system (No coverage is required) | See remarks below | |
| Remarks | | |
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| Builder's Risk Coverage | | |
| Coverage complies | Coverage is provided in | |
| Coverage is required, but does not comply | Primary property damage policy (specific or blanket) | |
| Coverage is required, but is not provided | Separate policy & includes Business Income | |
| No coverage is required | See remarks below | |
| Remarks | | |
| | | |
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| | | |
| Ordinance and Law Coverage | | |
| Coverage complies | Coverage is provided in | |
| Coverage is required, but does not comply | Primary property damage policy (specific or blanket) | |
| Coverage is required, but is not provided | Separate policy & includes Business Income | |
| No coverage is required | See remarks below | |
| | | |
| Remarks | | |
| | | |
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| Terrorism Coverage | |
|---|--|
| Coverage complies | Coverage is provided in |
| Coverage is required, but does not comply | Primary property damage policy (specific or blanket) |
| Coverage is required, but is not provided | Separate policy & includes Business Income |
| | See remarks below |
| | Gee remarks below |
| Remarks | |
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| Localized Perils Coverage | |
| Coverage complies | Coverage is provided in |
| Coverage is required, but does not comply | Primary property damage policy (specific or blanket) |
| Coverage is required, but is not provided | Separate policy & includes Business Income |
| No coverage is required | See remarks below |
| The develope to required | See remarks below |
| Remarks | |
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| Sewer and Drain Coverage | |
| Coverage complies | Coverage is provided in |
| Coverage is required, but does not comply | Primary property damage policy (specific or blanket) |
| Coverage is required, but is not provided | Separate policy & includes Business Income |
| No coverage is required | See remarks below |
| The develope to required | Cee remarks below |
| Remarks | |
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| 11-1116 | |
| Liability Insurance | |
| Liability Insurance (general, umbrella, excess, seni | ors, etc.) Liability Insurance Carrier(s) |
| All Liability Insurance carrier(s) comply with Freddie | |
| Mac acceptable insurer requirements | Yes No |
| Remarks | |
| Remarks | |
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| Curatia and inhility becomes for modified Duranti | |
| Specific or Liability Insurance for multiple Properti | es |
| The liability insurance provided with Specific Insurance Policy | Yes No |
| , | |
| The liability insurance provided with a policy that | Yes No |
| insures multiple Properties | |
| Remarks | |
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| Commercial General Liability | ty (CGL), Umbrella or Exces | s Liability Coverage | |
|---|-----------------------------------|---|--|
| Coverage complies | | Coverage is provided in | |
| Coverage is required, but does not comply | | Individual CGL policy | |
| Coverage is required, but is not provided | | Multiple property CGL policy | |
| Coverage is not required for l | | Specific Umbrella | |
| └── (3 stories or <; and/or < #3MN | и UPB) | Multiple property Umbrella/Excess | |
| | | See remarks below | |
| No contrar of the Helicone | Number of Obsides | | |
| Number of buildings: | Number of Stories: | Number of Properties (If Multiple property policy): | |
| Remarks | | 1 | |
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| Professional Liability Cover | | | |
| Professional liability coverage is o | nly required for a Seniors Housir | | |
| Coverage complies | | Coverage is provided in | |
| Coverage is required, but doe | | Included in CGL (specific or multiple property policy) | |
| Coverage is required, but is r | ot provided | Separate specific professional liability policy | |
| Coverage is not required | | Separate multiple property policy professional liability policy | |
| | | Specific professional liability | |
| | | Umbrella/Excess | |
| | | Multiple property policy professional liability Umbrella/Excess | |
| | | See remarks below | |
| Does Property include assisted liv skilled nursing units? (If yes, profe | | ☐ Yes ☐ No | |
| What is the total number of beds Alzheimer's care, and/or skilled r | | | |
| Primary Professional coverage | | Excess or Umbrella coverage | |
| Per-occurrence policy form | | Per-occurrence policy form | |
| Claims made policy form | | Claims made policy form | |
| Remarks | | | |
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| | | | |
| | | | |
| Vehicle Liability Coverage | | | |
| Coverage complies | | Coverage is provided in | |
| Coverage is required, but doe | es not comply | Individual CGL policy | |
| Coverage is required, but is r | not provided | Multiple property CGL policy | |
| Coverage is not required | | Separate policy | |
| | | See remarks below | |
| Remarks | | | |
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Complete the "Liability - Additional Information" section for each policy that is not included in the primary Commercial General Liability, Umbrella or Excess Liability policy. Attach additional sections as needed.

| Liability - Additional Information (Complete for each coverage excluded from the CGL, Umbrella or Excess Liability policy.) | | | |
|--|--|--|--|
| The information below is applicable to the following peril (check as applicable and complete/attach other schedules as needed). | | | |
| Automobile liability | ☐ Biohazard ☐ Swimming Pool ☐ Other: | | |
| Coverage complies Coverage is required, but does not comply Coverage is required, but is not provided Coverage is not required Remarks | Coverage is provided in Individual CGL policy Multiple property CGL policy Separate policy See remarks below | | |
| Cooperative Borrower's fidelity bond/crime insurance | and Cooperative directors' and officers' liability insurance | | |
| Coverage complies Coverage is required, but does not comply Coverage is required, but is not provided Coverage is not required | Coverage is provided in Individual Multiple property policy Multiple property policy Separate policy See remarks below | | |
| | | | |
| Documentation | | | |
| Insurance Documentation Documentation complies Documentation does not comply Documentation is required but is not provided Other, see remarks: Remarks | | | |
| Certification Certification | | | |
| I certify that the above information accurately describes the insurance that (check one) will be in effect on the subject property, or is now in effect on the subject property. | | | |
| I further certify that I am an officer of the Seller/Servicer and am authorized to sign this Certification on the Seller/Servicer's behalf. | | | |

Certification for adequate property damage coverage (per section 31A.4(a)) For a Property with Specific Insurance, I certify the Replacement Cost of: \$ is equal to 100 percent of the Replacement Cost (see section 31A.4(a)) For a property that is insured with Blanket Insurance, I certify: · the per occurrence limit of the Blanket Insurance policy is no less than the largest Replacement Cost exposure covered by the limit of the Blanket Insurance policy, and • the Blanket Insurance policy complies with the applicable requirements in chapter 31A of the Seller/Servicer Guide. For a property that is insured with Blanket Insurance, I am unable to certify: · the per occurrence limit of the Blanket Insurance policy is no less than the largest Replacement Cost exposure covered by the limit of the Blanket Insurance policy, and • the Blanket Insurance policy complies with the applicable requirements in chapter 31A of the Seller/Servicer Guide. To complete the certification section for Blanket Insurance, the Seller/Servicer should: Prepare a narrative description of the Seller/Servicer's actions (e.g., discussion(s) with Borrower, review of the PML and/or statement of values, discussions with Borrower's insurance agent/broker, discussions with an independent insurance consultant, etc.) · List the materials requested, received and reviewed · Include the Seller/Servicer's determination regarding acceptability of the Blanket Insurance coverage · Include the Seller/Servicer's annual certification to Freddie Mac that: The per occurrence limit of the Blanket Insurance policy is no less than the largest Replacement Cost exposure covered by the limit of the Blanket Insurance policy. • The Blanket Insurance policy complies with the applicable Freddie Mac requirements. If the Borrower and/or the insurance agent/broker was unwilling to cooperate, the Seller/Servicer should note the lack of cooperation in the narrative. Description of Seller/Servicer comments for Blanket Insurance: Seller/Servicer Signature Date Printed Name Title Signature Date Printed Name Title