



## Mortgage Guaranty Insurance Illinois Master Policy Endorsement

**Initial Insured's**

**Name and Mailing Address:** \_\_\_\_\_

**Master Policy Number:** \_\_\_\_\_

**Effective Date of Master Policy:** \_\_\_\_\_

The following shall apply if the principal place of business of the initial Insured, as designated on the cover page of the above-captioned Master Policy ("Policy"), is located in Illinois. Capitalized terms not otherwise defined herein shall have the meaning set forth in such Policy.

*Section 4 (Illinois) of Annex A (State Variations)* of the Policy is hereby deleted in its entirety and restated as follows:

#### 4. Illinois

a. Section 3(a) is modified to read as follows:

"This Policy applies to all Commitments and Certificates issued under the Policy on or after the effective date of the Policy. This Policy will remain in effect until it is cancelled. This Policy may be cancelled by the initial Insured for any reason or no reason upon 10 days' prior notice or by us upon not less than 60 days' prior notice and in accordance with the provisions of 215 ILCS 5/143.16 and 215 ILCS 5/143.16a. If this Policy is cancelled, the Policy will remain in effect with respect to any Commitment or Certificate issued before cancellation, provided that all required premiums are paid."

b. Section 5(a) is modified to read as follows:

"This Policy will be governed, interpreted, and enforced by and in accordance with the laws of the State of Illinois, without regard to conflict-of-law principles or to the location of any Property."

c. Section 94 is hereby amended by the addition of the following new provision as Section 94(d):

d) In the event a Claim is denied in whole or in part, the two-year period shall be extended by the number of days between the date of the denial and the date the Claim was initially filed.

d. The bankruptcy or insolvency of the Insured or the Insured's estate shall not relieve of us of our obligations hereunder.

e. *Illinois Notice:* Should any complaint arise regarding this insurance, the Insured may contact the Company's Chief Compliance Officer at Radian Guaranty Inc., 1500 Market Street, Philadelphia, PA 19102. Part 919 of the Rules of the Illinois Department of Insurance requires that our company advise you that, if you wish to take this matter up with the Illinois Department of Insurance, it maintains a Consumer Division in Chicago at 122 S. Michigan Ave., Chicago, Illinois 60603 and in Springfield at 320 West Washington Street, Springfield, Illinois 62767. You may also contact the Department via their website at <http://insurance.illinois.gov> or by phone at 312-814-2420 or 217-782-4515.

IN WITNESS WHEREOF, the Company has caused its Corporate Seal to be affixed hereto, and this Policy to be signed by its duly authorized officers in facsimile and to become effective as its original seal and signatures binding on the Company.



**Radian Guaranty Inc.**

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President

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Secretary