

Assignment Request

QBE Lenders' Mortgage Insurance Limited ABN 70 000 511 071



To allow us to respond to your request in a timely manner, please complete this form and submit with your completed Customer Assignment data file. Your assignment request is to be sent to RMBS@qbelmi.com with a copy to your QBE LMI account manager.

Letters of assignment of insurance policies can only be prepared after your data file has been verified by QBE LMI. All dates are to be completed as day/month/year.

Lender details

| | | | |
|-------------------|-------|----------|--|
| Lender name | | ABN | |
| Address | | | |
| | State | Postcode | |
| Primary contact | | | |
| Phone | Email | | |
| Alternate contact | | | |
| Phone | Email | | |

Parties to the transaction

To whom should the letter be addressed:

| | | | |
|----------|-------|----------|--|
| Name | | | |
| Position | | | |
| Address | | | |
| | State | Postcode | |
| Email | | | |

Name of party to whom these insurance policies are to be assigned:

| | |
|-------------------------------|--|
| Assignee | |
| Trust details (if applicable) | |

Assignment details

| | | |
|--|--|-----------|
| QBE LMI Master Policy (or Policies) under which the loans are currently insured: | (List policy numbers) | |
| Letter Required By: | (Please allow at least 10 business days) | |
| Expected transaction completion date: | | |
| The Customer Assignment data file, in QBE LMI format is: | Attached | To follow |
| Send assignment letter to: | Primary contact | Addressee |
| | Other, please specify | |

| | | | | | |
|-----------|-----------------------|---------------------|---------------------------------------|------|----------------------|
| Signed by | <input type="text"/> | On behalf of Lender | <input type="text"/> | Date | <input type="text"/> |
| | <i>Print position</i> | | <i>Signature of authorised person</i> | | <i>Date signed</i> |

QBE LMI internal use only

| | | |
|---|---------------|----------------------|
| 1. All loans in the spreadsheet have been confirmed as active under the Master Policy (or Policies) | Yes | No |
| <i>If no, details of unconfirmed policies must be provided in a separate annexure to this form</i> | | |
| 2a. Details in the spreadsheet supplied by the Lender have been reviewed and checked by: | (insert name) | <input type="text"/> |
| b. Have all details in the spreadsheet been reviewed and checked by QBE LMI? | Yes | No |
| <i>If no, please specify what information has been checked in the space below:</i> | | |
| <input type="text"/> | | |

| | | | | | |
|-----------|-----------------------|----------------------|---------------------------------------|------|----------------------|
| Signed by | <input type="text"/> | on behalf of QBE LMI | <input type="text"/> | Date | <input type="text"/> |
| | <i>Print position</i> | | <i>Signature of authorised person</i> | | <i>Date signed</i> |