LIMITED PRE-FORECLOSURE POLICY DOWN DATE ENDORSEMENT
T-99

Attached to and made a part of _________________ Title Insurance Company Pre-
Foreclosure Policy Number _________________ (hereinafter the "Policy") dated the _____
day of ____________, 20 ___.

1. Title Company File No.

2. Endorsement Premium: $

3. Date of Policy is hereby Changed to:

4. The Date of the Policy is not amended with respect to the tax exception shown as Item 1
   {one} of the Exceptions From Coverage. No insurance is afforded by this endorsement as to
   standby fees, taxes and assessments.

5. The Exceptions From Coverage of the Policy are amended to add the following items and
   recording information. Insert here, using either numbered or lettered paragraphs, an
   exception(s) for each recorded item(s). By exception to any matter: (i) the Company does not
   represent the priority or validity of the matter; (ii) the Insured does not agree that the matter
   is valid or superior to the Foreclosing Mortgage; and, (iii) the Insured does not ratify or
   confirm the matter. [Insert Item description(s) and recording information or state: "Item 5
   {five} is hereby deleted"]

This endorsement when countersigned below by an Authorized Countersignature, is made a part
of said Policy. Except as expressly modified by the provisions hereof, this endorsement is subject
to the following Policy matters: (i) Insuring Provisions; (ii) Exclusions from Coverage; (iii)
Exceptions From Coverage; (iv) the Conditions and Stipulations; and, (v) any prior
endorsements. Except as stated herein, this endorsement does not: (i) extend the effective date of
the Policy and/or any prior endorsements; (ii) increase the face amount of the Policy; or, (iii)
modify any of the unnumbered paragraphs of the Pre-Foreclosure Combined Schedule.

Authorized Countersignature

(Printed Name of Title Insurance Company)  (Printed Name of Title Insurance Agent or Direct
Operation or Title Insurance Company)

By: ______________________  By: _________________________
   (Signature)  (Signature)

Title: President  Title: _____________________

Printed Name: _______________  Printed Name: ________________
   (ATTEST IS OPTIONAL)  (ATTEST IS OPTIONAL)