

Form B

**APPEAL  
BEFORE THE NMI SETTLEMENT FUND  
ARBITRATOR**

**IN RE** \_\_\_\_\_,  
Applicant,

NMI SF Case No. ARB \_\_\_\_\_  
NMI SF Case No. HO \_\_\_\_\_

\_\_\_\_\_,  
Appellant,

v.

\_\_\_\_\_,  
Appellee.

**NOTICE OF APPEAL  
TO ARBITRATOR**

Pursuant to the NMI Settlement Fund Appeal Rules and Procedures (“Rules”), notice is hereby given that \_\_\_\_\_ [insert name of appealing party] (the “Appellant”), hereby submits this Notice of Appeal to the Arbitrator from the decision of the Hearing Officer dated \_\_\_\_\_.

As required under Rule 7.3 of the Rules, the Appellant hereby states the following:

A. Name and contact information of the Appellant and his or her representative (e.g., attorney), if any (including telephone number, fax number, and email address, if known):

Appellant’s Information:

Appellant’s Representative (Attorney) Name and Contact Information:

B. Name(s) and contact information of all other parties to Hearing Officer proceeding (the “Appellee(s)”), and their respective representatives, if any, (including telephone number, fax number, and email address, if known):

Appellee(s)' Information:

Appellee(s)' Representative(s) (Attorney) Name and Contact Information:

C. A copy of the decision dated \_\_\_\_\_ of the Hearing Officer, which is appealed herein, is attached to this Notice of Appeal.

D. Statement setting forth the portion or portions of the Hearing Officer's decision being appealed and the errors alleged:

Dated, this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

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[Print Name of Appellant]