



TITLE INSURANCE ORDER FORM

GENERAL INFORMATION

Order Date: _____
Ordered By: _____ @ _____
Phone No.: _____ Fax No.: _____
Transaction Type: [] New Mortgage [] Refinance [] Cash Sale [] Contract for Deed
[] Property Report [] Other _____
Sale Price: \$ _____ Loan Amount: \$ _____
Lender: _____
Policies to be Issued: [] Owner's and Mortgagee [] Owner's Only [] Loan Only [] None
Endorsements Requested: [] Location [] EPA [] Comprehensive [] Other _____

PROPERTY INFORMATION

Street Address: _____
Legal Description: _____
Tax I.D./Parcel I.D.: _____
Property Type: [] Residential [] Multi-Family [] Commercial [] Farmland Only
[] Farmland & Residence

SELLER'S INFORMATION

Name(s): _____ Broker/Agent: _____
Address: _____ Commission: _____
Phone #: _____ Commission Split: _____
S.S.N.: _____ Attorney: _____
Current Mortgage Holder(s) _____

BUYER'S INFORMATION

Name(s): _____ Broker/Agent: _____
Address: _____ Attorney: _____
Phone #: _____ S.S.N.: _____

CLOSING

Will closing be at Statham & Long, LLC? [] Yes [] No
Would you like to request a closing date? Date: _____ Time: _____
Deed and P-TAX preparation needed? [] Yes [] No
Special Instructions: _____