

# ALL AMERICAN COMMERCIAL TITLE

Phone: 763-780-6389

Fax: 763-780-6397

## APPLICATION FOR TITLE INSURANCE

Order No. \_\_\_\_\_ Date \_\_\_\_\_ Date needed \_\_\_\_\_

### TRANSACTION DATA

### TYPE OF POLICY ORDERED

Closing At: _____ Anticipated Closing Date: _____ Mortgage Amount\$ _____ Sale Price\$ _____ Type of Mortgage: _____ Does Lender or Owner request endorsements: Yes _____ No _____ If yes, which Endorsements? _____ Does Buyer request an Owner's Policy? Yes _____ No _____ Is this going to be a 1031 Exchange? Yes _____ No _____ Intermediary Company _____	<table><tr><td><input type="checkbox"/> Mortgage</td><td>Yes _____ No _____</td></tr><tr><td><input type="checkbox"/> Owners</td><td>Yes _____ No _____</td></tr><tr><td><input type="checkbox"/> Special Assessment Search</td><td>Yes _____ No _____</td></tr><tr><td><input type="checkbox"/> Mortgagees Plat Drawing</td><td>Yes _____ No _____</td></tr><tr><td><input type="checkbox"/> Priority Pictures</td><td>Yes _____ No _____</td></tr><tr><td><input type="checkbox"/> Construction Disbursement</td><td>Yes _____ No _____</td></tr><tr><td><input type="checkbox"/> Junior</td><td>Yes _____ No _____</td></tr><tr><td><input type="checkbox"/> O&amp;E</td><td>Yes _____ No _____</td></tr><tr><td><input type="checkbox"/> Tax Search</td><td>Yes _____ No _____</td></tr><tr><td><input type="checkbox"/> Flood Search</td><td>Yes _____ No _____</td></tr></table>	<input type="checkbox"/> Mortgage	Yes _____ No _____	<input type="checkbox"/> Owners	Yes _____ No _____	<input type="checkbox"/> Special Assessment Search	Yes _____ No _____	<input type="checkbox"/> Mortgagees Plat Drawing	Yes _____ No _____	<input type="checkbox"/> Priority Pictures	Yes _____ No _____	<input type="checkbox"/> Construction Disbursement	Yes _____ No _____	<input type="checkbox"/> Junior	Yes _____ No _____	<input type="checkbox"/> O&E	Yes _____ No _____	<input type="checkbox"/> Tax Search	Yes _____ No _____	<input type="checkbox"/> Flood Search	Yes _____ No _____
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### PROPOSED INSURED:

MORTGAGE POLICY: \_\_\_\_\_ (AND/OR ASSIGNS)

OWNERS POLICY: \_\_\_\_\_

CONTRACT FOR DEED POLICY: YES \_\_\_\_\_ NO \_\_\_\_\_ VENDOR'S \_\_\_\_\_ VENDEE'S \_\_\_\_\_

### PROPERTY INFORMATION

PROPERTY ADDRESS: \_\_\_\_\_

CITY \_\_\_\_\_ COUNTY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

LEGAL DISCRPTION (ATTACH COPY IF NECSSARY) \_\_\_\_\_

### PRESENT FINANCING / PAYOFF INFORMATION

NAME OF LENDER \_\_\_\_\_ LOAN NO. \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_ BALANCE \$ \_\_\_\_\_

PROPERTY IS: ABSTRACT \_\_\_\_\_ TORRENS \_\_\_\_\_ CERTIFICATE NO. \_\_\_\_\_

LOCATION OF ABSTRACT \_\_\_\_\_ FILE NO. \_\_\_\_\_

PRIOR TITLE EVIDENCE: \_\_\_\_\_

PROPERTY IS: VACANT LAND \_\_\_\_\_ EXISTING BLDG \_\_\_\_\_ COMMERCIAL \_\_\_\_\_  
RESIDENTIAL \_\_\_\_\_ PROPOSED CONSTRUCTION \_\_\_\_\_ RECENT IMPROVEMENTS \_\_\_\_\_

PRESENT OWNER(S) \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

OCCUPANT (IF NOT OWNER) \_\_\_\_\_ AS \_\_\_\_\_

BUYERS NAME (S) \_\_\_\_\_

BUYERS PRESENT ADDRESS: \_\_\_\_\_

SPECIAL INSTRUCTIONS: \_\_\_\_\_

ORDERED BY/SEND TO \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_ Fax No. \_\_\_\_\_

Contact: \_\_\_\_\_ Ref No. \_\_\_\_\_

Listing Agent \_\_\_\_\_

Selling Agent: \_\_\_\_\_

Copies To: \_\_\_\_\_

PLEASE RETURN TO TERI MCKENZIE, PRODUCTION MANAGER @ 763-780-6397

THANK YOU FOR YOUR BUSINESS