

ATTORNEY'S TITLE INSURANCE AGENCY, INC.

71 SMITH AVENUE, MOUNT KISCO, N.Y. 10549

(914) 244-3738 Fax (914) 244-3814

Title Order Form

Date _____ Sales Person _____
Ref. No. / Prior No. _____ Est. Closing Date _____

Part I – Applicant Information

Name _____ Phone # _____
Address _____ Fax # _____
City, State, Zip _____ Email _____

Part II – Party Information

Purchaser(s) _____
Record Owner(s) _____
Additional Info. _____

Part III – Order & Property Information

Order Type Purchase Refinance – CEMA/Payoff Informational Search
 Co-Op Foreclosure Construction Loan

Fee Amount \$ _____ Mortgage Amount \$ _____

Mortgagee Clause(s) _____

Property Address _____

Located in the Village Town City of _____

County _____ Tax Designation _____

Property Type 1-3 Family Condo PUD Coop Commercial

Municipals H & B Fire Applicant to Send
 C.O. Extra NYC Prior Title Co.
 Street Search(es) Survey Condo Endorsement
 New

Bankruptcy & Patriot Buyers Sellers/Owners Patriot Send to Bank Attorney

Part IV – Contact Information

Bank Attorney _____ Sellers Attorney _____
Attention _____ Attention _____
Address _____ Address _____
City, State Zip _____ City, State, Zip _____
Phone # _____ Phone # _____
Fax # _____ Fax # _____
Email _____ Email _____

Notes: _____