

TITLE INSURANCE APPLICATION

MAUMEE VALLEY TITLE AGENCY INC.

414 W. 3rd Street, Defiance, OH 43512
PH: 419-782-3334 Fax: 419-782-3354

Conventional FHA VA Rural Housing

Other _____

Case No. _____

Date Received _____

Date Wanted _____

Estimated Closing Date _____

County _____

Ordered by _____

Property Address: _____

Tax Parcel No.: _____ Legal Description: _____

Type of Property (circle one): Single Family Vacant Land Commercial Other _____

Purchase Price: _____ Earnest Money: _____

BORROWER(S) _____

CURRENT ADDRESS: _____

Home/Work Phone: _____ Attorney: _____
Phone: _____ Fax: _____

RECORD OWNER(S) _____

CURRENT ADDRESS: _____

Home/Work Phone: _____ Attorney: _____
Phone: _____ Fax: _____

LENDER INFORMATION:

Lender Name: _____

Lender Address: _____

Lender Contact: _____ PHONE: _____ EMAIL: _____

INSURANCE INFORMATION: (OR, FA)

Please issue a: _____ Commitment _____ Policy(s)

Amount of Insurance: Owner's Policy - \$ _____ Mortgage Policy - \$ _____

Endorsements Needed (Circle Desired): EPA ARM CONDO PUD Manufactured Housing

Other Requirements: _____

PARTY TO BE INSURED: OWNER'S POLICY: (Legal names) _____

LOAN POLICY: (Must have EXACT name of insured) _____

ADDITIONAL ITEMS THAT MAY BE REQUIRED, PLEASE ANSWER:

Mortgage Location Certificate Required:	yes or no	MVTA to order: _____
Water/Septic Examination Required:	yes or no	MVTA to order: _____
Termite Examination Required:	yes or no	MVTA to order: _____

Listing Broker/Agent: _____

Phone: _____ Email: _____

Selling Broker/Agent: _____

Phone: _____ Email: _____

Commission Rate and Split: _____

REMARKS: _____

