



Sales Rep: _____

PLEASE FAX ORDER FORMS TO (303) 373-5548 PLEASE FORWARD **BORROWER’S AUTHORIZATION** WITH ORDERS!

Ordered By: _____ Phone: _____

Address: _____

Fax: _____ Email: _____

Property Address: _____ Condo ☐ Yes ☐ No

Legal Address (if known): _____ County _____

Sales Price: \$ _____ County: _____ Parcel #: _____

EARNEST MONEY: ☐ Deposit w/Title Co. ☐ Will Bring Cashier’s ☐ Check Deduct from Commission

Listing Agent: _____ Selling Agent: _____

Agency: _____ Agency: _____

Address: _____ Address: _____

Ph: _____ Fax: _____ Ph: _____ Fax: _____

Email: _____ Email: _____

Cell: _____ Commission %: _____ Cell: _____ Commission %: _____

ESCROW / TITLE INFORMATION

Title Deadline Date: _____ Estimated Closing Date: _____

Type of Transaction: ☐ Sale ☐ Refinance ☐ 2nd Mortgage ☐ To Be Determined

Type of Policy: ☐ Short Form ☐ Long Form

Type of Rate: ☐ Bundled/Pkg Rate (Includes all Endorsements & Tax Cert) ☐ Refinance Rate

Endorsements: ☐ Form 100 ☐ Form 8.1 ☐ Form 110.7 (Adj) ☐ Form 115.1 (Condo)
 ☐ Minerals ☐ Tax Cert ☐ Other _____

SELLER AND BUYER INFORMATION

Seller #1: _____ Buyer #1: _____

SSN: _____ SSN: _____

Seller #2: _____ Buyer #2: _____

SSN: _____ SSN: _____

Address: _____ Address: _____

City, St, Zip: _____ City, St, Zip: _____

Ph: _____ Wk: _____ Ph: _____ Wk: _____

Email: _____ Email: _____

NEW LOAN INFORMATION

Lender to Close: ☐ Yes ☐ No

Loan Amount: _____ Loan Amount: _____

New Lender: _____ New Lender: _____

Address: _____ Address: _____

Type: ☐ CONV ☐ VA ☐ FHA ☐ PRIVATE Type: ☐ CONV ☐ VA ☐ FHA ☐ PRIVATE

PAYOFF INFORMATION

Payoff #1: _____ Payoff #2: _____

Loan# _____ Loan# _____

Phone: _____ Phone: _____

MISCELLANEOUS

HOA Management Co. _____ Ph: _____ Fax: _____

Water Department: _____ Ph: _____ Fax: _____

Sewer Department: _____ Ph: _____ Fax: _____

“Striving for a perfect transaction for every customer on every file”