

Order, Qualia & Abstract #

## REQUEST FOR TITLE COMMITMENT

Date:

PART 1 - REQUEST		LENDER INFORMATION	
From (Name and Address)		Lender/Bank's Name : _____ Loan Officer's Name : _____ Address : _____ Phone : _____ Fax: _____ Email Address : _____	
BUYER 1 INFORMATION		BUYER 2 INFORMATION	
Full Legal Name		Full Legal Name	
<small>(FIRST)</small>	<small>(MIDDLE)</small>	<small>(FIRST)</small>	<small>(MIDDLE)</small>
Married <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		Married <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	
SSN# / FEIN#		SSN# / FEIN#	
Address		Address	
Phone		Phone	
Email Address		Email Address	
PART 2 - PROPERTY AND MORTGAGE INFORMATION			
Occupancy Status		Loan Purpose	
<input type="checkbox"/> Primary Residence <input type="checkbox"/> Second Home <input type="checkbox"/> Investment Property		<input type="checkbox"/> Purchase <input type="checkbox"/> Construction Loan <input type="checkbox"/> Refinance Cash-Out <input type="checkbox"/> Refinance No Cash-Out	
Sales Price	Loan Amount	Escrow Amount	
\$	\$	\$	
Property Address			
Legal Description			
Home Owner's Name			
Property Type		Mortgage	
<input type="checkbox"/> Single Family <input type="checkbox"/> Multifamily <input type="checkbox"/> Manufactured Home <input type="checkbox"/> Commercial		Loan Number	
PART 3 - REQUEST FOR TITLE COMMITMENT			
Attachment(s)			
<input type="checkbox"/> Prior Owner's Title Policy <input type="checkbox"/> Prior Base Abstract <input type="checkbox"/> Sales Contract <input type="checkbox"/> Warranty Deed <input type="checkbox"/> Survey			
Type of Policy		Abstract Type	
<input type="checkbox"/> Loan <input type="checkbox"/> Owner's <input type="checkbox"/> Abstract Only		<input type="checkbox"/> Paper <input type="checkbox"/> Digital	
Estimated Closing Date		<input type="checkbox"/> Complete <input type="checkbox"/> Update <input type="checkbox"/> Supplemental	
Survey Coverage		Closing Location	
<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Genesis Abstract & Title <input type="checkbox"/> Other	
Additional Endorsement Requirements			
SPECIAL INSTRUCTIONS OR COMMENTS			

Date:

SELLER 1 INFORMATION		SELLER 2 INFORMATION	
Full Legal Name <small>(FIRST) (MIDDLE) (LAST)</small>		Full Legal Name <small>(FIRST) (MIDDLE) (LAST)</small>	
Married <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		Married <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	
SSN# / FEIN#		SSN# / FEIN#	
Address		Address	
Phone		Phone	
Email Address		Email Address	
PART 4 - SELLING AGENCY		PART 5 - LISTING AGENCY	
Name		Name	
Address		Address	
Phone		Phone	
Fax		Fax	
Email Address		Email Address	
SURVEY FIRM INFORMATION		MORTGAGE BROKER/LENDER INFORMATION	
Survey Firm		Firm	
Name		Broker Name	
Address		Address	
Phone		Phone	
Email Address		Email Address	



Genesis Abstract & Title  
410 E. Court Street, Atoka, OK 74525

580.378.7410 580.200.3008 office@genesisabstract.net