

CLEAR TITLE

Nationwide, inc.

FAX TO: 888-451-3610
EMAIL TO: orders@cleartitleinc.com
9300 W 110th Street, Suite 110
Overland Park, KS 66210

DATE _____

REQUEST FOR TITLE INSURANCE

SOURCE INFORMATION:

Company Name: _____
Contact Name: _____
Email Address: _____
Telephone No: _____ Fax: _____

LENDER INFORMATION

Company Name: _____
Address: _____

TYPE OF TRANSACTION: PURCHASE REFINANCE FIRST/SECOND SEARCH ONLY

LOAN AMOUNT(S): _____ SALE AMOUNT: _____

BUYER / BORROWER INFORMATION:

Name: _____ SS# _____
Name: _____ SS# _____
Phone: _____

PROPERTY ADDRESS: _____

CITY: _____ STATE: _____ COUNTY: _____ ZIP: _____

OWNER / SELLER INFORMATION:

Name: _____ SS# _____
Name: _____ SS# _____
Phone: _____

Are we ordering payoff? YES NO

Borrower's Authorization attached for Payoff(s)? YES NO

If Purchase, is contract attached? YES NO

Legal Description: _____

SPECIAL INSTRUCTIONS/ COMMENTS

