



ORDER FORM

CUSTOMER

Date Ordered: _____ Closing Date: _____
Person Ordering: _____ Company Name: _____
E-mail: _____ Phone: _____ Fax: _____
Sales Representative: _____

Service Requested:

Loan Type:

Title Insurance: 2008 2006 Purchase
Preliminary Commitment Refinance
24 Month Chain of Title Payoff Land Contract
Current Owner Search Commercial
Document Prep Construction Loan
Document Retrieval 2nd Mortgage

◆ Prior Title Policy Sent with this order? Yes No
Prior File Number (if available) _____
◆ Is Royal Title To Close? Yes No
Place of Closing? _____
◆ Order Survey? Yes No
Preferred Surveyor _____
◆ Need A Deed & Affidavit? Yes No
Preferred Attorney _____

REALTORS

Listing Agent Name: _____ Buying Agent Name: _____
Company Name: _____ Company Name: _____
Phone: _____ Phone: _____
Fax: _____ Fax: _____
E-mail: _____ E-mail: _____
Commission: _____ Split: _____
Purchase Agreement Attached? Yes No Amendments and/or Counter Offers Attached? Yes No

BORROWERS

Name (first, middle, last): _____ SSN: _____
Name (first, middle, last): _____ SSN: _____
Address: _____ City: _____ State: _____ Zip: _____
Home Phone: _____ Work Phone: _____ E-mail: _____
Vesting Husband & Wife Joint Tenants /w Rights of Survivorship Tenants in Common

SELLERS

Name (first, middle, last): _____ SSN: _____
Name (first, middle, last): _____ SSN: _____
Address: _____ City: _____ State: _____ Zip: _____
Home Phone: _____ Work Phone: _____ E-mail: _____

LENDER

Lender Name: _____ Contact Name: _____
Address: _____
City: _____ State: _____ Zip: _____
E-mail: _____ Phone: _____ Fax: _____
Loan Amount: _____ Sales Amount: _____

PROPERTY

Property Address: _____
City: _____ State: _____ Zip: _____
County: _____ Legal Description: _____

PAYOFF

Should Royal Title Services order payoff(s)? Yes No If yes, please send an authorization.
Name: _____ Account #: _____ Phone: _____
Name: _____ Account #: _____ Phone: _____

SPECIAL INSTRUCTIONS