

Closing Order Form

REQUESTER INFORMATION

Your Name:
Street Address:
City / State / Zip Code:
Phone Number:
Fax Number:
E-mail Address:

PROPERTY INFORMATION

Street Address:
City / State / Zip Code:
Sales Price / Value:
Type of Property:
Single-Family Home
Multi-Family Home
Condominium
Land
Other / Please Specify:

SELLER(S) INFORMATION

Seller #1 Name:
Street Address:
City / State / Zip Code:
Phone Number:
E-mail Address:
Seller #2 Name:
Street Address:
City / State / Zip Code:
Phone Number:
E-mail Address:

MORTGAGE BROKER INFORMATION

Mortgage Broker Name:
Street Address:
City / State / Zip Code:
Contact Name:
Phone Number:
E-mail Address:

LISTING REAL ESTATE AGENT INFORMATION

Listing Agent Name:
Real Estate Agency:
Street Address:
City / State / Zip Code:
Phone Number:
Fax Number:
E-mail Address:

QUESTIONS OR COMMENTS

SERVICES AND TIMELINES

Services Required:
(Check all that apply.)
Title Update
Title Examination
Closing Services
Other / Please Specify:
Date Needed By:
Estimated Closing Date:

BUYER(S) / BORROWER(S) INFORMATION

Buyer/Borrower #1 Name:
Street Address:
City / State / Zip Code:
Phone Number:
E-mail Address:
Buyer/Borrower #2 Name:
Street Address:
City / State / Zip Code:
Phone Number:
E-mail Address:

LENDER / LOAN INFORMATION

Lender Name:
Street Address:
City / State / Zip Code:
Contact Name:
Phone Number:
E-mail Address:
Loan Number:
Amount of Loan:
Type of Loan:
Not Applicable
Purchase
Refinance
Construction
Home Equity
Other / Please Specify:

CURRENT LIENHOLDER(S) INFORMATION

Lienholder #1 Name:
Account Number:
Phone Number:
Lienholder #2 Name:
Account Number:
Phone Number:

SELLING REAL ESTATE AGENT INFORMATION

Selling Agent Name:
Real Estate Agency:
Street Address:
City / State / Zip Code:
Phone Number:
Fax Number:
E-mail Address: