

# A-1 TITLE, LLC.

Title Insurance-Real Estate Closings

"Prompt & Efficient"

210 Main St. South  
Pine City MN 55063

Phone:(320) 629-2727  
Fax: (320) 629-0009

## Title Request

Date: \_\_\_\_\_

Lender: \_\_\_\_\_

Branch: \_\_\_\_\_ Loan Officer: \_\_\_\_\_

Phone and Fax: \_\_\_\_\_

Email: \_\_\_\_\_ Closing Date: \_\_\_\_\_

Parcel I.D Number: \_\_\_\_\_ **\*ATTACH LEGAL DESCRIPTION TO THIS ORDER**

## Loan Information

Loan Number: \_\_\_\_\_ Purchase or Refinance (circle one)

Amount: \_\_\_\_\_ Estimated Closing Date: \_\_\_\_\_

## Borrower(s)

Name: \_\_\_\_\_ Marital Status: \_\_\_\_\_ Name of Spouse: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ email address: \_\_\_\_\_

Name: \_\_\_\_\_ Marital Status: \_\_\_\_\_ Name of Spouse: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ email address: \_\_\_\_\_

## Seller(s)

Name: \_\_\_\_\_ Marital Status: \_\_\_\_\_ Name of Spouse: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ email address: \_\_\_\_\_

Name: \_\_\_\_\_ Marital Status: \_\_\_\_\_ Name of Spouse: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ email address: \_\_\_\_\_

## Realtor(s)

Selling Realtor: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ email address: \_\_\_\_\_

Listing Realtor: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ email address: \_\_\_\_\_

Endorsements Required: \_\_\_ Manufactured Home Other: \_\_\_\_\_

Additional Items Requested: \_\_\_ CPL loan specific \_\_\_ Prelim HUD \_\_\_ Wire Instructions \_\_\_ Plat Drawing \_\_\_ Assessment search