



Classic Title Agency, Inc.

## REQUEST FOR TITLE INSURANCE

### Mortgage Broker Info:

Company: \_\_\_\_\_ Name: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_ Email: \_\_\_\_\_

### Lender Info:

Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_

### Subject Property:

Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_ County: \_\_\_\_\_

### Borrower(s) Information:

Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_  
Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

### Seller(s) Information:

Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_  
Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

### Requirements:

*If the following transaction is a purchase please fax a contract to (720) 449-0168.*  
 Purchase  Refinance  Land Contract  1<sup>st</sup> Mortgage  2<sup>nd</sup> Mortgage

Survey  24 Month Chain  Tax Cert  Closing Protection Letter

### Details:

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

### Payoffs:

1<sup>st</sup> Mortgage: \_\_\_\_\_ Account Number: \_\_\_\_\_ Phone: \_\_\_\_\_  
2<sup>nd</sup> Mortgage: \_\_\_\_\_ Account Number: \_\_\_\_\_ Phone: \_\_\_\_\_

### Comments:

3091 S Jamaica Ct • Suite 230 • Aurora, CO 80014  
Phone: 720.449.0161 • Toll Free: 800.736.2431 • Fax: 720.449.0168  
Website: [www.classictitleonline.com](http://www.classictitleonline.com)