

TITLE EXAMINATION REQUEST

Prodigy Title Agency

Company Name _____ Phone _____ Fax _____

ORDER DATE: _____ LOAN AMOUNT \$ _____

LOAN OFFICER: _____ PHONE NO. _____

INVESTOR: _____

INVESTOR CONTACT: _____ INVESTOR PHONE: _____

PROPERTY ADDRESS: _____

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

BORROWER'S NAME(S): _____

HOME PHONE: _____ WORK PHONE: _____

SELLING BROKERAGE: _____ AGENT: _____

PHONE: _____ FAX: _____

SELLER'S NAME(S): _____

HOME PHONE: _____ WORK PHONE: _____

LISTING BROKERAGE: _____ AGENT: _____

PHONE: _____ FAX: _____

PAYOFF INFORMATION: WOULD YOU LIKE US TO ORDER PAYOFFS?

FIRST MORTGAGE: LENDER: _____ ACCT #: _____

SECOND MORTGAGE: LENDER: _____ ACCT #: _____

SURVEY REQUIRED: YES NO

(circle one)

ESTIMATED CLOSING DATE: _____

SPECIAL INSTRUCTIONS: _____

FAX COMPLETED REQUESTS TO PRODIGY TITLE (513) 870-9071

(513) 870-9070 PH

8080 Beckett Center Drive, Suite 318, West Chester, OH 45069