HBW H.B. Wilkinson Title Company, Inc. est. 1883

APPLICATION FOR TITLE INSURANCE BUY/SELL TRANSACTION

REQUIRED ITEMS ARE HIGHLIGHTED

DATE ORDERED: _____ PREVIOUS HBW ORDER #: _____

SALES PRICE: _____ MORTGAGE AMOUNT: _____

BUYERS'/BORROWERS' NAMES & ADDRESSES:

Name: _____

Phone No.: _____

Email Address: _____

Address: _____

SELLERS' NAMES & ADDRESSES:

Name: _____

Phone No.: _____

Email Address: _____

Address: _____

ONE OF THE FOLLOWING MUST BE FILLED OUT

- PROPERTY STREET ADDRESS: _____

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

- LEGAL DESCRIPTION: _____
- PIN NO.: _____

PROPERTY TYPE: ◯ Residential ◯ Multi-Family ◯ Commercial ◯ Farmland Only ◉ Farmland & Residence

WILL THE CLOSING BE CONDUCTED BY HBW TITLE COMPANY? ◯ YES ◉ NO

IF HBW IS DOING THE CLOSING, PLEASE PROVIDE THE FOLLOWING: DATE: _____ TIME: _____

CLOSING OFFICE LOCATION:

◯ Dixon ◯ Freeport ◯ Galena ◯ Moline ◯ Morrison ◯ Mt. Carroll ◯ Princeton ◯ Sterling

CPL LENDER ADDRESS: _____

CHAIN OF TITLE REQUIRED: ◯ 12 Month ◯ 24 Month ◯ Other: _____

WILL FLOOD CERTIFICATION BE PROVIDED BY HBW TITLE COMPANY? ◯ YES ◯ NO

IS THIS NEW CONSTRUCTION? ◯ YES ◉ NO

ENDORSEMENTS REQUESTED:

☐ Location ☐ ALTA 6 ☐ ALTA 8.1 ☐ ALTA 9 ☐ PUD ☐ Other: _____

ADDITIONAL NOTES:

PARTIES IN THE TRANSACTION

APPLICANTS ROLE IN TRANSACTION:

◯ Listing Broker ◯ Seller's Attorney ◯ Selling Broker ◯ Buyer's Attorney ◯ Lender

APPLICANT:

Company Name: _____ Contact Name: _____

Phone No.: _____ Email Address: _____

Address: _____

LISTING BROKER:

Company Name: _____ Contact Name: _____

Phone No.: _____ Email Address: _____

Address: _____

SELLER'S ATTORNEY:

Company Name: _____ Contact Name: _____

Phone No.: _____ Email Address: _____

Address: _____

SELLING BROKER:

Company Name: _____ Contact Name: _____

Phone No.: _____ Email Address: _____

Address: _____

BUYER'S ATTORNEY:

Company Name: _____ Contact Name: _____

Phone No.: _____ Email Address: _____

Address: _____

LENDER:

Company Name: _____ Contact Name: _____

Phone No.: _____ Email Address: _____

Address: _____