

CHICAGO TITLE INSURANCE COMPANY

424 Main Street • Suite 200

Liberty Building

Buffalo, NY 14202-3479

Telephone: (716) 854-2982 Fax: (716) 852-7346

Attn: _____ Date: _____

Charge to: _____ Attn: _____

Deliver to: _____ Attn: _____

Property Address: _____

ABSTRACT ORDERS

TITLE INSURANCE ORDERS

Type of Order:

- Continuation
- Continuation for Foreclosure
- Stub
- Stub for Foreclosure
- Full (Please attach copy of deed, survey, description or S.B.L. No.)
- Prem Only
- Limited Liability for Refinance Orders/Home Equity
- Other _____

Owner _____ Dead
 Owner _____ Alive
 Owner _____ Dead
 Owner _____ Alive

Date Needed: _____

- Mortgage Policy Amount: _____
- Fee Policy Amount: _____
- Building Loan Amount _____

Endorsements:

- 8.1 (Environmental) ARM
- Waiver of Arbitration
- Other _____

Purchaser (s): _____
 Lender: _____

- Type of Order: Direct Closing Attorney
- Examining Counsel BPC Needed: Yes No
- Preliminary Title Report
- Commercial Residential
- Resale Refinance

Reissue of: _____
 Previous Policy Amount: _____

Report to: _____

Date Needed: _____

COMMENTS:

FOR CHICAGO USE ONLY

DATE REC'D: _____ INITIALS: _____ COMMENTS: _____