

Title Order Request

Fax Request Form to 719-873-1775

From:		Date:	
Company:		FOR ALPINE USE File No: Title Deadline: Closing Date:	
Address:			
City/Zip:			
Phone:			
Email:			

Please PRINT the information below. Thank you.

Name(s) of Owner(s):			
Owner(s) Address:			
City/Zip:			
Legal(s):			
See Atchd Exhibit A:			
*Number of Parcels:			
County:			
Name(s) of Buyer(s)			
Loan Amount:	\$		Sales Price: \$
New Lender's Position:	1st 2nd 3rd 4th	Buy/Sell Refinance Construction Perm	
Please issue the following via:	Fax Mail Both	(Call 719-873-1776 for premium quotes)	

Title Commitment & Policy

(Policy Premiums are calculated based on Loan Amount and/or Contract Sales Price.)

Premium	\$
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Forms/Endorsement(s)

(Forms and Policy Endorsements "buy back" exceptions to the Title Policy.)

Premium	\$
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Tax Certificate(s)/Parcel:

(Tax Certificate(s) are requested for each parcel as described in the Treasurer's Office.)

Premium	\$
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Ownership & Encumbrance Report

(Typed information & copies of Warranty Deed and all open liens, judgements, etc.)

Premium	\$
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Closing Date:	
Remarks:	

Thank you. We sincerely appreciate your continued business and referrals.

Fax to: 719-873-1775