

**MASSACHUSETTS TITLE AND ESCROW SERVICES, INC.**

ORDER TITLE

Date: \_\_\_\_\_ Company: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Street: \_\_\_\_\_ City, State, Zip Code: \_\_\_\_\_

Refinance \_\_\_\_\_ Purchase \_\_\_\_\_ HELOC \_\_\_\_\_

Estimated Closing Date: \_\_\_\_\_

**PROPERTY AND MORTGAGE INFORMATION**

Occupancy Status

Loan

Primary

Purchase

Second Home

Cash Out Refinance

Investment Property

No Cash Out Refinance

Condominium

HELOC

Sales Price \_\_\_\_\_

Loan Amount \_\_\_\_\_

Second Amount \_\_\_\_\_

**PROPERTY ADDRESS**

Street \_\_\_\_\_

City/State/Zip Code \_\_\_\_\_

**BORROWER INFORMATION**

Borrower 1 \_\_\_\_\_

Borrower 2 \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Borrower's Street \_\_\_\_\_

City/State/Zip Code \_\_\_\_\_

**SELLER INFORMATION**

Seller 1 \_\_\_\_\_

Seller 2 \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Seller's Street \_\_\_\_\_

City/State/Zip Code \_\_\_\_\_

**LENDER'S INFORMATION**

Lender's Name \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Lender's Street \_\_\_\_\_

City/State/Zip Code \_\_\_\_\_

**REQUEST FOR TITLE COMMITMENT**

Attachment:

- |  |  |
|--|--|
| <input type="checkbox"/> Prior Title Policy      | <input type="checkbox"/> Warranty Deed |
| <input type="checkbox"/> Title Insurance Request | <input type="checkbox"/> Survey        |
| <input type="checkbox"/> Contract                |  |

Type of Policy \_\_\_\_\_

Estimated Closing Date \_\_\_\_\_

To Request Payoff, please fax signature/authorization form with:

Lender's Name \_\_\_\_\_

Lender's Account No. \_\_\_\_\_

2<sup>nd</sup> Lender's Name \_\_\_\_\_

2<sup>nd</sup> Lender's Account No. \_\_\_\_\_

Comments:

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