

Aitkin County Abstract Company

Members of American Land Title Association-Minnesota Land Title Association
Agents for Old Republic National Title Insurance Co.

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Aitkin, MN 56431
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APPLICATION FOR TITLE INSURANCE

DATE: _____ DATE NEEDED: _____ ORDER NUMBER: _____

ACCT. NUMBER: _____

THE UNDERSIGNED HEREBY APPLIES FOR THE FOLLOWING (ON A SALES PRICE OF \$ _____)

1. MORTGAGEES POLICY \$ _____ FHA VA CONVENTIONAL

2. OWNERS POLICY \$ _____ REFINANCE CONSTRUCTION LOAN

3. SPECIAL ASSESSMENT SEARCH YES _____ NO _____ ENDORSEMENTS _____ (please specify)

4. PLAT DRAWING YES _____ NO _____

5. PRIORITY PICTURES YES _____ NO _____

6. CONSTRUCTION DISBURSEMENT YES _____ NO _____

7. CLOSING AT AITKIN COUNTY ABSTRACT: [GUaaaaPQaaaa PROPOSED CLOSING DATE _____ aaaaaaaaaaaaaaaaaa _____

PROPOSED INSURED:

MORTGAGE POLICY: _____ (AND/OR ASSIGNS) _____

OWNERS POLICY: _____

CONTRACT FOR DEED POLICY: YES _____ NO _____ (VENDOR'S) _____ (VENDEE'S) _____

*** PROPERTY INFORMATION ***

PROPERTY ADDRESS: _____

CITY _____ COUNTY _____ STATE _____ ZIP _____

LEGAL DESCRIPTION (ATTACH COPY IF NECESSARY) TAX NO.(S) _____

PROPERTY IS: ABSTRACT _____ TORRENS _____ CERTIFICATE NO: _____

LOCATION OF ABSTRACT: _____ FILE NO. _____

PRIOR TITLE EVIDENCE: _____ FILE NO. _____

PROPERTY IS: VACANT LAND _____ EXISTING BLDGS _____ COMMERCIAL _____ RESIDENTIAL _____

PROPOSED CONSTRUCTION _____ RECENT IMPROVEMENTS/REPAIRS _____

PRESENT OWNER(S) _____

HOME PHONE: _____ WORK PHONE: _____

OCCUPANT (IF NOT OWNER) _____ AS _____

BUYERS NAME(S) _____

BUYERS PRESENT ADDRESS _____

ANY CLAIMS OR TITLE DIFFICULTIES KNOWN TO OR REPORTED TO APPLICANT AND/OR SPECIAL INSTRUCTIONS

ORDERED BY / SEND TO

ADDRESS _____

PHONE _____ FAX NO. _____

CONTACT _____ REF. NO. _____

LISTING AGENT _____

SELLING AGENT _____

COPIES TO _____