



MAJESTY

TITLE SERVICES, LLC

Where Service Reigns

FAX TO 866-212-2401

APPLICATION FOR TITLE INSURANCE – MULTI-STATE

Date Ordered: _____

Date Required: _____

Title No.: _____

Anticipated Closing Date: _____

(Internal Use)

Policy(s) to be issued: \$ _____
(Fee/Owner's)

\$ _____
(Mortgage)

1st Mtg. _____ 2nd Mtg. _____

Address of Premises: _____

Municipality: _____ County: _____ State _____

Block: _____ Lot(s): _____

Seller's Name(s): _____

Maiden Name/Additional Names: _____

Seller's Attorney: _____ Attorney's Phone: _____

Attorney's Address: _____

Purchaser's/Borrower's Name(s): _____

Maiden Name/Additional Names: _____

Purchaser's Attorney: _____ Attorney's Phone: _____

Attorney's Address: _____

Lender's Name: _____

Lender's Address: _____

Loan Officer: _____ Processor: _____

Lender's Attorney: _____ Attorney's Phone: _____

Attorney's Address: _____

Survey Information (check one):

- Please order a new survey
- Old Survey with Inspection/Affidavit
- Applicant will order
- Not required

Additional Searches/Services:

- Closing Service Letter (Approved Att'y/Agent)
- Notice of Settlement
- Flood
- Settlement/Closing Service
- Other – List below

Back Title: Enclosed Not Available

Additional Information:
