



APPLICATION FOR  
TITLE INSURANCE

Riverside Title use only:

FILE # \_\_\_\_\_  
Owners \$ \_\_\_\_\_  
Mortgage \$ \_\_\_\_\_  
Closing Fee \$ \_\_\_\_\_  
Search Only \$ \_\_\_\_\_  
Draws \$ \_\_\_\_\_  
Previous # \_\_\_\_\_

[rob@riversidetitle.org](mailto:rob@riversidetitle.org) Phone: (231)264-6462 Fax: (231)264-6344

**Transaction:**     Cash                       Land Contract     Search  
                          New Mortgage     Refinance

**POLICY COVERAGE:**

Owners: \$ \_\_\_\_\_ Mortgage: \$ \_\_\_\_\_

Preferred Closing Date: \_\_\_\_\_

Previous Title Work # \_\_\_\_\_

County: \_\_\_\_\_ Township: \_\_\_\_\_ City/Village: \_\_\_\_\_

Legal: \_\_\_\_\_

**Lender:** \_\_\_\_\_ **Contact Name:** \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Contact Info:**

**Purchaser:** \_\_\_\_\_ Home #: \_\_\_\_\_

Marital Status

Work #: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Seller:** \_\_\_\_\_ Home #: \_\_\_\_\_

Marital Status

Work #: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Listing Agent:**

**Name:** \_\_\_\_\_ **Office:** \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Selling Agent:**

**Name:** \_\_\_\_\_ **Office:** \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Ordered By:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Notes:** \_\_\_\_\_