

**LOAN AND PROPERTY INFORMATION SHEET**

*In order for us to obtain statements of account from your existing lender(s) or homeowner's association, please provide us with the following information on your accounts. We must have **timely, accurate and complete information** on your accounts, as some take up to 30 days to return our request. Please fill out and return this form as soon as possible.*

ESCROW NO.: \_\_\_\_\_  
PROPERTY ADDRESS: \_\_\_\_\_

DATE: \_\_\_\_\_

**FIRST DEED OF TRUST HOLDER:**

Lender: \_\_\_\_\_ Phone: \_\_\_\_\_

Loan No.: \_\_\_\_\_ Approximate unpaid balance: \$ \_\_\_\_\_

Impounds Taxes?  Yes  No Insurance?  Yes  No

Is there a prepayment penalty?  Yes  No If yes, approximate amount \$ \_\_\_\_\_

**SECOND DEED OF TRUST HOLDER:**

Lender: \_\_\_\_\_ Phone: \_\_\_\_\_

Loan No.: \_\_\_\_\_ Approximate unpaid balance: \$ \_\_\_\_\_

Is there a prepayment penalty?  Yes  No If yes, approximate amount \$ \_\_\_\_\_

**THIRD DEED OF TRUST HOLDER:**

Lender: \_\_\_\_\_ Phone: \_\_\_\_\_

Loan No.: \_\_\_\_\_ Approximate unpaid balance: \$ \_\_\_\_\_

Is there a prepayment penalty?  Yes  No If yes, approximate amount \$ \_\_\_\_\_

**HOA/MANAGEMENT CO. INFORMATION (This may not apply to your property)**

Name of Association: \_\_\_\_\_ Phone: \_\_\_\_\_

Management Company: \_\_\_\_\_ Phone: \_\_\_\_\_

**FIRE INSURANCE INFORMATION**

Agent Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Policy Number: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Premium Amount: \_\_\_\_\_ Expiration Date \_\_\_\_\_

\* \* \* \* \*

Our signatures below are to be considered instructions for obtaining statements; to comply with the instructions of the above-named companies; and our authorization to pay from funds due at the close of escrow said companies' fees, including, but not limited to, Statement Fees, Transfer Fees, Late Fees, Prepayment Penalties, Impound Account Shortages without our further approval.

In the event any of the above-listed deeds of trust secure a line of credit, please consider this our authorization to freeze the account as of this date. We agree not to request any advances on this account on or after this date. Upon payment in full, all lines of credit are hereby requested to be closed. We agree to pay any additional fees incurred due to closing of the line of credit. Please include such fees on your demand for payoff to North American Title Company.

We, the undersigned, certify the above information is true and correct as to the best of our knowledge.

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