



**HTC Title Services, Inc.**  
**Order Form**

From: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

File # \_\_\_\_\_  
**Tentative Closing Date:**  
\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Date \_\_\_\_\_

Sales Price: \$ \_\_\_\_\_

Commitment Needed By: \_\_\_\_\_

New Mortgage Amount: \_\_\_\_\_

Buyer's Name(Proposed Insured) \_\_\_\_\_ SS#: \_\_\_\_\_

SS#: \_\_\_\_\_

Seller's Name: \_\_\_\_\_ SS#: \_\_\_\_\_

SS#: \_\_\_\_\_

Lender (Proposed Insured): \_\_\_\_\_

Property Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Permanent Tax Number: \_\_\_\_\_  
 Single Family  New Construction  
 2 Units  Apartment Building  
 3 Units  Commercial  
 4 Units  Vacant  
 Condominium  Other \_\_\_\_\_

Legal Description:

Same as Attached County: \_\_\_\_\_  
 \_\_\_\_\_  
\_\_\_\_\_

**Additional Instructions**

**OBTAIN WATER CERTIFICATION**  
(If condominium, supply paid assessment letter with order)

**OBTAIN ZONING**  
 Single  2  3  4 Units

Type of Transaction

1st Mortgage  2nd Mortgage  
 Assumption  Home Equity  
 Cash Sale  Refinance

Additional Order Request:

Building Registration (Chicago)  
 Special Assessment Bills (Chgo)  
 Birth/Death Certificates (Cook)

Lender:

Name \_\_\_\_\_  
Street \_\_\_\_\_  
City \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone# \_\_\_\_\_  
Fax# \_\_\_\_\_  
Attn: \_\_\_\_\_

Buyer's Attorney:

Name \_\_\_\_\_  
Street \_\_\_\_\_  
City \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone# \_\_\_\_\_  
Fax# \_\_\_\_\_

Seller's Attorney

Name \_\_\_\_\_  
Street \_\_\_\_\_  
City \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone# \_\_\_\_\_  
Fax# \_\_\_\_\_