

# Integrity Title Group - Title Order Request - Refinance

\* Today's Date

\* Submitted By

\* E-Mail Address

\* Your Company

Property Address & Zip Code

Borrower's Mailing Address & Zip Code

Same as Property Address

Borrower 1	Full Legal Name	<input type="text"/>	Home	<input type="text"/>	Work	<input type="text"/>	Fax	<input type="text"/>
	E-Mail	<input type="text"/>	Cell	<input type="text"/>	SSN	<input type="text"/>	Married	<input type="checkbox"/>

Borrower 2	Full Legal Name	<input type="text"/>	Home	<input type="text"/>	Work	<input type="text"/>	Fax	<input type="text"/>
	E-Mail	<input type="text"/>	Cell	<input type="text"/>	SSN	<input type="text"/>	Married	<input type="checkbox"/>

Lender	Full Legal Name	<input type="text"/>	Work	<input type="text"/>	Fax	<input type="text"/>
	E-Mail	<input type="text"/>				

Mtg Broker	Full Legal Name	<input type="text"/>	Work	<input type="text"/>	Fax	<input type="text"/>
	E-Mail	<input type="text"/>				

Loan Payoff 1	Lender Name	<input type="text"/>	Account Number	<input type="text"/>	Phone	<input type="text"/>
	Loan Payoff 2	<input type="text"/>				

Insurer Name	<input type="text"/>	Policy Number	<input type="text"/>	Phone	<input type="text"/>
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Homeowner's  
Policy

Insurance Agency Name

Contact Name

Phone

New - 1<sup>st</sup> Mtg Loan Amount

2<sup>nd</sup> Mtg Loan  
Amount

Loan Type

First Mortgage

Home Equity or Second Mortgage

Vacant Land

Construction Loan

Other

Please check each box below that applies to your order:

The property is free and clear.

Please order a survey.

Please order loan payoffs.

Please order a pest inspection.

A copy of the new or current survey will be faxed or e-mailed to ITG.

A copy of the current owner's title insurance policy will be faxed or e-mailed to ITG.

Special Instructions

You may also print and fax this form to (813) 287-2150