

# TITLE ORDER REQUEST

Burnt Store Title & Escrow  
14850 Tamiami Trail  
North Port, FL 34287

Ph:(941)200-2222 Fx: (888)202-3905  
Email: NewOrders@burntstoretitle.com

Date Ordered: \_\_\_\_\_  
Ordered By: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

Purchase Price: \$ \_\_\_\_\_ Closing Date: \_\_\_\_\_  
Escrow Deposit Amount \$ \_\_\_\_\_ Loan Amount: \$ \_\_\_\_\_

## PROPERTY INFORMATION

Property Address: \_\_\_\_\_  
Parcel ID # \_\_\_\_\_  
Legal Description \_\_\_\_\_  
\_\_\_\_\_

## SELLERS INFORMATION

Name: \_\_\_\_\_  
Address \_\_\_\_\_  
Phone: \_\_\_\_\_ Marital Status   
Phone 2: \_\_\_\_\_  
Email: \_\_\_\_\_  
Will Sellers Attend the Closing?  Does Seller have a current Survey?   
**IS/ARE SELLER(S) UNITED STATES CITIZEN(S)?**

\*\*Please note that we must be notified if seller is not a US Citizen\*\*

## BUYERS INFORMATION

Name: \_\_\_\_\_  
Address \_\_\_\_\_  
Phone: \_\_\_\_\_ Marital Status   
Email: \_\_\_\_\_  
Will Buyer Attend the Closing?  Would Buyer Like us to Order a Survey?

## LISTING AGENT

Company: \_\_\_\_\_  
Listing Agent: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_  
Commission \_\_\_\_\_ Transaction Fee \_\_\_\_\_

## SELLING AGENT

Company: \_\_\_\_\_  
Selling Agent: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_  
Commission \_\_\_\_\_ Transaction Fee \_\_\_\_\_

## NEW LENDER INFORMATION

Company: \_\_\_\_\_  
Contact \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_  
New Loan Amount \_\_\_\_\_

Is there a Homeowners Association?   
Association Name: \_\_\_\_\_  
Dues Paid:  In the amount of \$ \_\_\_\_\_

SPECIAL INSTRUCTIONS: