

C.T.I. ABSTRACT CORP.
Application for Title Insurance

Applicant: _____ Date: _____

Phone: _____

Fax: _____

Email: _____

Attention: _____

Fee Amount: _____ 1st Mortgage: _____
2nd Mortgage: _____

Premises: _____ Residential
 Commercial
 Vacant Land

Tax Map Section: _____ Block: _____ Lot: _____

Town or Village of: _____ County: _____ Filed Map No. _____

Owner/Seller: _____

Purchasers: _____

Seller's _____ Phone: _____
Attorney: _____ Fax: _____

Email: _____

Attention: _____

Bank Lender: _____

Phone: _____

Fax: _____

Email: _____

Bank _____ Phone: _____
Attorney: _____ Fax: _____

Email: _____

Attention: _____

SURVEY: Attached Inspection Endorsement To Follow

Municipals Bankruptcy Search Patriot Search Flood Certification

NOTES:

176 Main Street, Goshen, NY 10924
Phone # (845) 294-5428 Fax # (845)294-8964

angela@ctiabstract.com

amber@ctiabstract.com