

# ESQUIRE LAND SERVICES, LTD

160 SUMMIT AVE #205 MONTVALE, NJ 07645 TEL: 845-578-9700 FAX: 917-565-9400

## TITLE ORDER FORM (PURCHASE)

Property Information:

Street Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ S/B/L: \_\_\_\_\_

Transaction Details: Sale Price: \_\_\_\_\_ Loan Amount: \_\_\_\_\_

Name of Purchaser(s): \_\_\_\_\_

Name of Seller(s): \_\_\_\_\_

Name of Lender: \_\_\_\_\_

Borrower Atty: \_\_\_\_\_ Seller Atty: \_\_\_\_\_

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

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

Email: \_\_\_\_\_ Email: \_\_\_\_\_

Lender Atty: \_\_\_\_\_ Additional Reports to: \_\_\_\_\_

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

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

Email: \_\_\_\_\_ Email: \_\_\_\_\_

Order Survey? ( ) Yes ( ) No  
(if "yes" please attach Survey order form)

Order ACRIS/PREP docs? ( ) Yes ( ) No  
(if "yes" please attach ACRIS/PREP order form)

Order CEMA? ( ) Yes ( ) No  
(if "yes" please attach CEMA order form)

Order Subordination? ( ) Yes ( ) No  
(if "yes" please attach Subordination order form)

Additional Instructions: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

*Thank you for your order!*

Internal use only:

Applicant: \_\_\_\_\_

Tel #: \_\_\_\_\_

Email: \_\_\_\_\_

Title #: 14-ESQ- \_\_\_\_\_

Date of Order: \_\_\_\_\_

Account Rep: \_\_\_\_\_