

STATEMENT OF INFORMATION

(For confidential use by the Title Company in searching the records in connection with the file number shown below.)

Property Address:

File No.:

Ref No.:

In order to expedite the completion of your transaction we are requesting that you complete the following "Statement of Information" form. We are not unnecessarily interested in your personal affairs, however, we have been asked to insure the title to real property in which you are interested and that requires a title search.

In searching your title we may encounter judgments, bankruptcies, divorces and/or income tax liens against persons with the same or similar names to yours. Such matters cloud the title to your property unless eliminated. The information you provide, and your spouse or domestic partner¹ if you are married, or in a domestic partnership, can promptly eliminate all matters not directly affecting you or the property being searched, avoid any delay in your transaction and provide you with the most efficient service possible.

Thank you for your cooperation in furnishing us with the necessary information and please be assured that your information is confidential and used only for the purpose which we have stated.

Name:	First	Middle – if none, indicate	Last	US Resident since	Year
Have you ever been known by any other name?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	If yes, indicate name _____		
Social Security No	XX-XXX-	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Driver License No	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	(Last 4 digits)
Date of Birth	_____		Location of Birth	_____	
Spouse or Domestic Partner's Name:	First	Middle – if none, indicate	Last	US Residence since	Year
Have you ever been known by any other name?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	If yes, indicate name _____		
Social Security No	XX-XXX-	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Driver License No	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	(Last 4 Digits)
Date of Birth	_____		Location of Birth	_____	
If married or in a domestic partnership, _____ at _____					
			Date	City and State	

RESIDENCES LAST 10 YEARS (list most recent first)

Number and Street	City, State, Zip Code	From/To (Date)
Number and Street	City, State, Zip Code	From/To (Date)
Number and Street	City, State, Zip Code	From/To (Date)

(attach additional page, if necessary)

OCCUPATIONS

Occupation	Co. Name	Address, City, State Zip	No. Yr's/Mo's
Spouse or Domestic Partner's Occupation	Co. Name	Address, City, State Zip	No. Yr's/Mo's

BUSINESS OWNED OR PARTNERSHIP AFFILIATIONS

<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Firm/Partnership Name	Address, City, State Zip	No. Yr's/Mo's
Tax ID No. (Last 4 digits)			
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Firm/Partnership Name	Address, City, State Zip	No. Yr's/Mo's
Tax ID No. (Last 4 digits)			

(attach additional page, if necessary)

¹ Domestic Partner refers to an individual in a state recognized quasi-marital relationship entered into by same-sex couples whether such relationship is identified as a "domestic partnership," "civil union", or similar term.

FORMER MARRIAGE(S) – OR DOMESTIC PARTNERSHIP(S)

Please complete the following: **OR** If no former marriages or domestic partnerships, write "NONE" _____

Name of former husband or domestic partner _____

Deceased Divorced Date: _____ Where: _____
State

Name of former wife or domestic partner _____

Deceased Divorced Date: _____ Where: _____
State

(attach additional page, if necessary)

CHILDREN

Name _____ Date of Birth _____ Name _____ Date of Birth _____

Name _____ Date of Birth _____ Name _____ Date of Birth _____

(attach additional page, if necessary)

Have you ever owned a boat, airplane or any licensed vehicle (other than a car)? No Yes

If Yes, describe vehicle: _____ License Number _____

Have you ever filed bankruptcy? No Yes

If Yes, where County _____ State _____

Is any portion of the new loan funds to be used for construction? No Yes

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT:

Signature: ✓ _____ Spouse or Domestic Partner's Signature: ✓ _____

Home Phone _____ Bus Phone _____ Spouse or Domestic Partner's Bus Phone _____

Cell Phone _____ Email _____ Spouse or Domestic Partner's Cell Phone _____ Spouse or Domestic Partner's Email _____