



TITLE ORDER INTAKE FORM REFINANCE

Return to: team@guardtitle.com

Order Date: _____

Date Needed: _____

Loan Amount: _____

Ordered By: _____ Agent No.: _____

Phone No.: _____ Fax No.: _____ Email: _____

Delivery Method: *(If none specified, we will send via email.)*

Email:

US Mail

Pickup

UPS Next Day (\$10.00 added to Title Preparation Fee)

Fax: _____

Transaction Type:

- Purchase (with mortgage)
- Cash Deal
- Refinance
- Foreclosure
- Construction Loan
- Tract Search
- Search Only

Type of Property:

- 1-3 Family residential
- Condo
- Multifamily (4 or more residential)
- Commercial
- Mixed Use
- Vacant Land
- Apartment Building/2-3
Flat No. of units: _____

GUARANTORS

Name of Borrower/Entity/Company: _____

SSN (*Last 4 digits*) or FEIN (*in full*): _____

Address: _____

City, State, Zip: _____

GUARANTORS ATTORNEY

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____ Fax: _____

Email: _____

Name of Borrower/Entity/Company: _____

SSN (*Last 4 digits*) or FEIN (*in full*): _____

Address: _____

City, State, Zip: _____

County: _____

** Non-purchase money mortgage transactions only.*

Name of Lender: _____

Lender's Attorney: _____

Address: _____

City, State, Zip: _____

Email: _____ Ph: _____

Subject Address: _____

City, State, Zip: _____