

TITLE ORDER FORM

Purchase Only

Kidwell, Kent & Curran Office to Conduct Closing:

(Select one.)

Maryland
Virginia

Are you a:

(Select one.)

Lender
Realtor
Consumer

Parties to Contact:

Buyer:

Buyer 1:

Buyer 2:

Seller:

Seller 1:

Seller 2:

Agent Information:

Agent for Buyer:

Agent Name:

Agent Company:

Office #:

Home #:

FAX #:

E-mail:

Agent for Seller:

Agent Name:

Agent Company:

Office #:

Home #:

FAX #:

E-mail:

Property Information:

Property Address:

Property City:

Property State:

Property Zip:

Legal Description:

Lot:

Block:

Subdivision:

Condo Unit #:

Condominium:

Tax ID:

New Lender Information:

Loan Officer:

New Lender Company Name:

Loan Officer Phone:

Loan Officer Fax:

Sales Price:

Loan Amount:

Type of Loan:
(Select one.)

FHA
VA
Conventional
Assumption

Deposit:

Settlement Date:

Special Notes: