



PURCHASE	_____
REFI	_____
25 Yr.	_____
Doc Ret.	_____

Order # _____ Rep: _____
 Date: _____ County: _____ Through Date: _____
 Name: _____
 Address: _____ Town/City: _____ State: _____

Assessment / Tax Information*

Parcel ID: _____ Map: _____ Block: _____ Lot: _____
 Land: _____ Building: _____ Other: _____ Total: _____
 Tax Year: _____ Taxes Paid: Yearly Semi-Annual Quarterly

Total Yearly Tax: \$ _____	1st Pay't: _____	Due Date: _____	Amount: _____	PAID <input type="checkbox"/>
	2nd Pay't: _____	Due Date: _____	Amount: _____	<input type="checkbox"/>
Delinquent: _____	3rd Pay't: _____	Due Date: _____	Amount: _____	<input type="checkbox"/>
Notes: _____	4th Pay't: _____	Due Date: _____	Amount: _____	<input type="checkbox"/>

Water Bill: _____ Sewer Bill: _____

Most Current Vesting Deed Information

Deed Type: Warranty Deed Quit Claim Probate Deed Amount: \$ _____
 Instrument Date: _____ Recorded: _____ Volume: _____ Page: _____
 Grantor (Seller): _____
 Grantee (Buyer): _____

Mortgage Information

Open End Closed Mortgage Deed Equity

Instrument Date: _____ Amount: _____ Volume: _____ Page: _____
 Recorded Date: _____ Maturity Date: _____
 Mortgagor (Buyer): _____
 Mortgagee (Lender): _____
 Assigned: _____

Instrument Date: _____ Recorded: _____ Volume: _____ Page: _____
 Assigned: _____

Instrument Date: _____ Recorded: _____ Volume: _____ Page: _____

