



AMERICAN FAMILY TITLE AGENCY, INC.

3101 West 25th Street #B102 Cleveland, Ohio 44109
Phone: 216-522-9800 Fax: 216-522-0603 Email: service@amfamtitle.com

REPORT ORDER FORM

Date: _____

Name: _____ Phone No.: _____

Party: Seller Buyer/Borrower Loan Officer Listing Agent Selling Agent

Company Name: _____ Work Phone: _____

Email Address: _____

(The final report will be emailed to this address unless instructed differently.)

Transaction Type:

Sales Transaction Refinance Transaction Other: _____

Please check the Report(s) you wish to order:

- Property Profile Report \$15.00
- Water/Sewer Status Report \$15.00
- Chain of Title/Tax & Legal Report \$25.00
- Limited Lien Report \$150.00
- Title Well Check Report \$170.00
- Preliminary Title Report \$200.00

Subject property address: _____

County: _____ PPN: _____

Owner: _____ Owner: _____

SSN: _____ SSN: _____

Phone: _____ Phone: _____

Special instructions:

PLEASE DROP OFF OR MAIL THIS COMPLETED ORDER FORM, WITH PAYMENT, TO
American Family Title Agency, Inc. <- (check made payable to)
ATTN: Service Department
3101 West 25th Street, Suite 203
Cleveland, Ohio 44109

If you have any questions, please contact us at the phone number listed above. Thank you.