



**AMERICAN FAMILY TITLE AGENCY, INC.**

3101 West 25<sup>th</sup> Street #B102 Cleveland, Ohio 44109  
Phone: 216-522-9800 Fax: 216-522-0603 Email: [service@amfamtitle.com](mailto:service@amfamtitle.com)

TITLE/ESCROW ORDER FORM

Date: \_\_\_\_\_

Name: \_\_\_\_\_ Phone No.: \_\_\_\_\_

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

Company Name: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Title and/or Escrow Services:

TITLE ONLY  ESCROW ONLY  TITLE and ESCROW

Transaction Type:

Sales Transaction  Refinance Transaction  Other: \_\_\_\_\_

LOAN TYPE:  FHA  CONVENTIONAL  HELOC  1<sup>ST</sup> MORTGAGE  2<sup>nd</sup> MORTGAGE  
 Other (please specify): \_\_\_\_\_

Proposed Lender: \_\_\_\_\_ Loan Amount: \$ \_\_\_\_\_

Subject property address: \_\_\_\_\_

County: \_\_\_\_\_ PPN: \_\_\_\_\_

Borrower: \_\_\_\_\_ Borrower: \_\_\_\_\_

SSN: \_\_\_\_\_ SSN: \_\_\_\_\_

Phone: \_\_\_\_\_ Phone: \_\_\_\_\_

Borrower's address, if different from subject property:

\_\_\_\_\_

Sellers Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Seller(s) Address: \_\_\_\_\_

Sellers SSN# \_\_\_\_\_

Listing Agent: \_\_\_\_\_ Phone: \_\_\_\_\_

Office: \_\_\_\_\_

Selling Agent: \_\_\_\_\_ Phone: \_\_\_\_\_

Office: \_\_\_\_\_

Reissue Rate? (Please send Prior HUD or Title Policy) Yes No

Special instructions:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_