

BLACK RIVER COUNTRY ABSTRACT COMPANY

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DATE _____ DATE WANTED _____ CLOSING DATE _____

BILL TO: _____

ORDERED BY: _____

BUYER(S): _____

ADDRESS: _____

PHONE NO.: _____

SOCIAL SECURITY NOS.: _____

SELLER(S): _____

ADDRESS: _____

PHONE NO.: _____

SOCIAL SECURITY NOS.: _____

SEND TO: _____ COPIES TO: _____

ARE BUYER/SELLER RELATED? ___ YES ___ NO

IS PROPERTY HOMESTEAD OF SELLER? ___ YES ___ NO

PRIMARY USE OF PROPERTY FOR BUYER: _____

HOW WILL BUYER HOLD TITLE? ___ SINGLE PERSON ___ TENANTS IN COMMON
___ HUSBAND AND WIFE, SURVIVORSHIP MARITAL PROPERTY ___ JOINT TENANTS

TITLE REPORT

___ CURRENT OWNER ___ TWO OWNER ___ EXTENDED REPORT ___ 40 OR 60 YEAR SEARCH

TITLE INSURANCE

___ NEW APPLICATION ___ RE-ISSUE ___ ABSTRACT SURRENDER

OWNER'S POLICY \$ _____ MORTGAGE POLICY \$ _____

MORTGAGE

___ IN HOUSE ___ 1ST ___ 2ND ___ CONSTRUCTION ___ HOME EQUITY ___ SECONDARY MARKET

LENDER: _____ LOAN OFFICER: _____

___ CLOSING REQUIRED ___ BROKER (NAME): _____

INSTRUCTIONS: _____

SUBJECT PROPERTY

PROPERTY ADDRESS: _____

DESCRIPTION: _____

TAX PARCEL NO. _____ BRCA PREVIOUS FILE NO. _____