

1700 W. Big Beaver, Suite 340 Troy, MI 48084 Phone (248)647-3600 Fax (248647-3700

COMMERCIAL TITLE REQUEST FORM

E-mail Orders to: **Documents@estatestitle.com**

| Purcha ser(s): | SS | 5#: | | | |
|---|--------------------------|-------|----------|-----------|---|
| : | SS | 5#: | | | |
| Seller(s): | SS | 5#: | | | |
| : | SS | 5#: | | | |
| Property Address: | | | | | |
| City: | County: | | | Zip: | |
| Legal Description: | | | | | |
| Sales Price: | | | | | |
| Mortgage amount, if applicable: | | | | Purchase | |
| Simultaneous issue (owner and lender policies): | | | | Refinance | |
| Special Instructions: | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Lender: | | | | | |
| Loan Officer: | | Proc | essor: _ | | |
| Phone: | Fa | X: | | | |
| Person placing order's r | name and contact informa | ntion | | | |
| | | | | | _ |