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INFORMATION SHEET FOR

Please complete and return by mail or fax (708-456-4520) at your earliest opportunity.

1. TITLE POLICY OR TORRENS CERTIFICATE - Insures the marketability of title; issued upon your purchase of this property by Attorney's Title Guaranty Fund, Inc., Chicago Title, First American Title, etc.

_____ Enclosed

_____ Given to: _____

NOTE: If the Title Policy is not available, please enclose a copy of your Deed.

2. SURVEY _____ Enclosed

_____ Given to: _____

3. MORTGAGES/HOME EQUITY LOAN

FIRST MORTGAGE:

Name and Address of Loan Company or Bank: _____

Phone No.: _____

Loan Number: _____

Date Payment is Due (1st, 15th) _____

SECOND MORTGAGE

Name and Address of Loan Company or Bank: _____

Phone No.: _____

Loan Number: _____

Date Payment is Due (1st, 15th) _____

4. HOMEOWNERS OR CONDO ASSOCIATION

We pay \$_____ (Monthly, Quarterly, or Annually)

To: _____

Phone No.: _____

Date of last payment: _____

5. WELL/SEPTIC. Do you have a well and/or septic system? Yes _____ No _____

6. SANITARY DISTRICT. Is your home serviced by a sanitary district or drainage district which bills separately from your real estate tax bill? If so, please indicate.

A. Date of last payment: _____

B. Name of the District: _____

7. SELLERS' SOCIAL SECURITY NUMBERS

Name: _____

SS#: _____

Name: _____

SS#: _____

8. LAND TRUST. Is this property held in a Land Trust? Yes _____ No _____

If so, Trust No.: _____ Name of Trustee: _____

NOTE: Please attach a copy of the Trust Agreement, if available.

9. LEASES _____ Enclosed

_____ Given to: _____

Thank you for completing this information sheet. Once again, please fax the completed information sheet (and requested documents) to (708) 456-4520, or mail the documents to us at:

SMITH & SMITH

MAIL: P.O. BOX 59 • RIVER GROVE, ILLINOIS 60171-0059

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