

STATEMENT OF INFORMATION CONFIDENTIAL INFORMATION FOR YOUR PROTECTION

Completion of this statement expedites your application for title insurance, as it assists in establishing identity, eliminating matters affecting persons with similar names and avoiding the use of fraudulent or forged documents. Complete all blanks (please print) or indicate "none" or "N/A." If more space is needed for any item(s), use the reverse side of the form. Each party (and spouse/domestic partner, if applicable) to the transaction should personally sign this form.

ESCROW NO.:

LOCATE NO.:

TITLE NO.:

NAME AND PERSONAL INFORMATION

_____ Date of Birth _____
 First Name _____ Middle Name _____ Last Name _____ Maiden Name _____
(If none, indicate)
 Home Phone _____ Business Phone _____ Birthplace _____
 Social Security No. _____ Driver's License No. _____
 List any other name you have used or been known by _____
 State of residence _____ I have lived continuously in the U.S.A. since _____

Are you currently married? _____ If yes, complete the following information:

Date and place of marriage _____
 Spouse: _____ Date of Birth _____
 First Name _____ Middle Name _____ Last Name _____ Maiden Name _____
(If none, indicate)

Home Phone _____ Business Phone _____ Birthplace _____
 Social Security No. _____ Driver's License No. _____
 List any other names you have used or been known by _____
 State of residence _____ I have lived continuously in the U.S.A. since _____

Are you currently a registered domestic partner? _____ If yes, complete the following information:

Domestic Partner: _____ Date of Birth _____
 First Name _____ Middle Name _____ Last Name _____ Maiden Name _____
(If none, indicate)
 Home Phone _____ Business Phone _____ Birthplace _____
 Social Security No. _____ Driver's License No. _____
 List any other names you have used or been known by _____
 State of residence _____ I have lived continuously in the U.S.A. since _____

CHILDREN

Child Name: _____ Date of Birth: _____ Child Name: _____ Date of Birth: _____
 Child Name: _____ Date of Birth: _____ Child Name: _____ Date of Birth: _____

(If more space is required, use reverse side of form)

RESIDENCES (LAST 10 YEARS)

 Number & Street _____ City _____ From (date) to (date) _____

 Number & Street _____ City _____ From (date) to (date) _____
(If more space is required, use reverse side of form)

OCCUPATIONS/BUSINESSES (LAST 10 YEARS)

 Firm or Business name _____ Address _____ From (date) to (date) _____

 Firm or Business name _____ Address _____ From (date) to (date) _____
(If more space is required, use reverse side of form)

ESCROW NO.:

LOCATE NO.:

TITLE NO.:

SPOUSE'S/DOMESTIC PARTNER'S OCCUPATIONS/BUSINESSES (LAST 10 YEARS)

Firm or Business name Address From (date) to (date)

Firm or Business name Address From (date) to (date)

PRIOR MARRIAGE(S)

Any prior marriages for either spouse? If yes, complete the following:

Prior spouse's (Party A) name: Prior Spouse of Party A:

Marriage terminated by: Death Divorce Date of termination

Prior spouse's (Party B) name: Prior Spouse of Party B: Spouse

Marriage terminated by: Death Divorce Date of termination

(If more space is required, use reverse side of form)

PRIOR DOMESTIC PARTNERSHIP(S)

Any prior domestic partnerships for either person? If yes, complete the following:

Prior partner's name: Prior Partner:

Partnership terminated by: Death Dissolution Nullification Termination Date of termination

Prior partner's name: Prior Partner:

Partnership terminated by: Death Dissolution Nullification Termination Date of termination

(If more space is required, use reverse side of form)

INFORMATION ABOUT THE PROPERTY

Buyer intends to reside on the property in this transaction: Yes No

Owner to complete the following items

Street Address of Property in this transaction:

The land is unimproved; or improved with a structure of the following type: A Single or 1-4 Family Condo Unit Other

Improvements, remodeling or repairs to this property have been made within the past six months: Yes No

If yes, have all costs for labor and materials arising in connection therewith been paid in full? Yes No

Any current loans on property? If yes, complete the following:

Lender Lender Loan Amount Loan Account #

Loan Amount Loan Account #

The undersigned declare, under penalty of perjury, that the foregoing is true and correct.

Executed on, at

Signature Signature

(Note: If applicable, both spouses/domestic partners must sign.)

THANK YOU.