



p 877.848.5320
f 908.462.8008

Somerville Office
70 Grove Street
Somerville, NJ 08876

Hoboken Office
50 Harrison Street
Suite 118
Hoboken, NJ 07030

Date: _____ Due by: _____ Closing Date: _____

Purchase Refinance

Purchase Price \$ _____ Loan Amount \$ _____

Buyer's Attorney: _____

Phone: _____ Fax: _____ E-mail: _____

Title binder delivered via: Overnight Fax E-mail

Buyer's Real Estate Agent: _____ Phone: _____ E-mail: _____

Sellers Attorney: _____

Phone: _____ Fax: _____ E-mail: _____

Send binder to Seller's Attorney? Yes No

Seller's Real Estate Agent: _____ Phone: _____ E-mail: _____

Lender Certification and Address for CSL: _____

Lender E-mail: _____

Property Information

Street Address: _____ Block: _____ Lot: _____

Municipality: _____ County: _____ Zip Code: _____

Seller/Borrower Information

Present Owner/Seller: _____

Borrowers/Buyers: _____

Additional Information: (Please Check)

Simplicity to Act as Settlement Agent? Yes No

Notice of Settlement: Prepare Only Prepare & File Do Not Prepare

Survey: Simplicity Title to Order Attorney to Order Surveyor Preference: _____

Flood Certification: Standard Life of Loan Do Not Order

Comments: _____