

ORDER FORM

Please provide Purchase/Sales Agreement WITH order form

Mid-American Title Company. 424 East Front Street. Traverse City, MI 49686 Phone: 231.929.1235

LISTING OFFICE _				Phone#		Fax#	
LISTING AGENT				Email			
SELLING OFFICE				Phone#		Fax#	
COMMISSION							
SELLER:							
	Married	Single	_ Widowed	Trust	Estate	Divorcing	
						Primary #	
	Email addres	is					
	Mailing Add	ess					
PURCHASER:							
	Married	Single	_ Widowed	Trust	Estate	Divorcing	
	Phone #	Work#	t	Cell #		Primary #	
	Email addres	ss					
	Mailing Add	ess					
SELLING PRICE:							
PROPERTY ADD			CITY	′ :	ZIP CODE:		
PROPERTY TAX	NUMBER:						
SELLERS UNDER	RLYING MORTG	AGE(S) COMPA	NY:				
PURCHASER LENDER:				CONTACT PERSON:			
				LENDER EMAIL:			
PROPERTY CUR	RENTLY RENTE	D: (Y) (N	I)				
ANY SPECIAL AS) (N)	ASSUMED BY	ASSUMED BY PURCHASER:			
PROPERTY LEGA	AL DISCRIPTION	N:	-				
COUNTY:TOWNSHIP/CITY:							
ADDITIONAL IN	FORMATION:						
MAIL CLOSING:	(Y)(N)			то s	SELLER	TO PURCHASER	
MAIL OUT ADD	RESS:						

<u>IF YOU HAVE A CURRENT OWNER'S POLICY OF TITLE INSURANCE,</u>

PLEASE PROVIDE WITH ORDER

THANK YOU FOR YOUR ORDER!