

**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

First Name _____ Middle/Maiden name _____ Last Name _____ Date of Birth _____
(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/Maiden name Last Name
(If none, indicate)

Are you currently a registered domestic partner? _____

Domestic Partner: _____ Date of Birth _____
First Name Middle/Maiden name Last 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 _____

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)

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

PRIOR MARRIAGE(S)

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

Prior spouse's name: _____ Prior Spouse of Husband _____

Marriage terminated by: Death _____ Divorce _____ Date of termination _____

Prior spouse's name: _____ Prior Spouse of Husband _____ Wife _____

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 _____ Loan Amount _____ Loan Date _____

Lender _____ Loan Amount _____ Loan Date _____

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.