

FREESTATE TITLE SERVICES OF ANNAPOLIS, INC.

Use this form to place an order, please complete the form below. Either email or fax.
This form may be used for either a Purchase or Refinance.

Please select one: Purchase Refinance

Closing Date: _____

PROPERTY INFORMATION:

Property Address: _____

City: _____

State/Zip Code: _____

County: _____

Subdivision: _____

Lot/Block/Square: _____

PURCHASER/BORROWER INFORMATION:

Purchaser 1: _____

Purchaser 2: _____

Contact numbers: _____

Purchaser email: _____

Attending Closing: _____

If POA is needed please contact our office for additional information

SELLER INFORMATION (IF APPLICABLE)

Seller 1: _____

Seller 2: _____

Contact numbers: _____

Seller email: _____

Attending closing: Yes No Power of Attorney needed

FREESTATE TITLE SERVICES OF ANNAPOLIS, INC.

LOAN INFORMATION:

New Loan Information:

Lender: _____

Loan Officer: _____

Contact numbers: _____

Sales price: _____

Loan amount: _____

Loan type: _____

EXISTING MORTGAGE INFORMATION:

Lender (First Trust): _____

Acct Number: _____

Contact Number: _____

Lender (Second Trust) _____

Acct Number: _____

Contact Number: _____

REALTOR INFORMATION:

Selling Agent:

Listing Agent:

Name:

Name:

Office:

Office:

Contact No:

Contact No:

Fax:

Fax:

Email:

Email:

FREESTATE TITLE SERVICES OF ANNAPOLIS, INC.

Special Instructions:

For example: First time Homebuyer, Home Warranty, Seller Closing Cost Assistance

Comments:

Email this form to bthibault@troeseannapolis.com
Bobbie Thibault, Settlement Closer/Marketing

Contact names:

Tracey V. Fye, President:
tfye@troeseannapolis.com

Kathy Brady, Processing Manager
kbrady@troeseannapolis.com

Bobbie Thibault, Settlement Closer/Marketing
bthibault@troeseannapolis.com

Thank you for your time in filling out this form to assist Freestate Title to ensure a smooth closing.