



2800 W. HIGGINS ROAD, SUITE 180, HOFFMAN ESTATES, IL 60169
 PHONE: (847) 252-7341 * FAX: (847) 252-7346
 E-MAIL ORDERS: neworders@acqt.com
 SCAN AND SEND DOCUMENTS TO: docs@acqt.com

DATE: _____ ORDER #: _____ UNDERWRITER: CTIC or FNTIC

SALE PRICE: \$ _____ LOAN AMOUNT: \$ _____ TENTATIVE CLOSING DATE: _____

BORROWERS/SELLERS: _____

BUYERS: _____

PROPERTY ADDRESS: _____

UNIT NUMBER: _____ COUNTY: _____

CITY, STATE, ZIP: _____

PROPERTY TAX I.D. NUMBER: _____

LEGAL DESCRIPTION: _____

PROPERTY TYPE: SINGLE FAMILY CONDOMINIUM 2-4 UNITS TOWNHOUSE
 VACANT LAND COMMERCIAL NEW CONSTRUCTION OTHER

TRANSACTION TYPE: REFINANCE PURCHASE/SALE ALTA COMMITMENT OWNERSHIP SEARCH
 HELOC CASH SALE TRACT SEARCH OWNERS POLICY
 2ND MORTGAGE CONTRACT SALE CONST. ESCROW JR. ALTA LOAN POLICY
 NEW CONSTR. FORECLOSURE _____ MO. CHAIN OF TITLE SURVEY
 DEED IN LIEU SHORT SALE MONEY LENDER ESCROW DEED/MONEY ESCROW
 AGENCY ESCROW FLOOD CERT
 ZONING CERT - CHICAGO WATER CERT - CHICAGO

ENDORSEMENTS: COMPREHENSIVE LOCATION NOTE CONDOMINIUM EPL
 REVERSE MORT. NEGATIVE AMORT. LINE OF CREDIT ARM PUD

Send Copies of Commitment and Invoice to:

BUYERS' ATTORNEY: _____

Address: _____

City, State, Zip: _____

Phone/Cell: _____ Fax: _____

E-Mail: _____

SELLERS' ATTORNEY: _____

Address: _____

City, State, Zip: _____

Phone/Cell: _____ Fax: _____

E-Mail: _____

LENDER: _____

Contact: _____

Address: _____

City, State, Zip: _____

Phone/Cell: _____ Fax: _____

E-Mail: _____ Contact: _____

MORTGAGE BROKER: _____

Contact: _____

Address: _____

City, State, Zip: _____

Phone/Cell: _____ Fax: _____

E-Mail: _____ Contact: _____

TITLE APPLICANT: _____

Contact: _____

Address: _____

Phone/Cell: _____ Fax: _____

Attorney Agent with Acquest Title? YES NO

City, State, Zip: _____

E-Mail: _____

SPECIAL INSTRUCTIONS: _____

ACQUEST SALES REPRESENTATIVE: _____ Cell Phone: _____ E-Mail: _____