



ORDER NUMBER: _____

DATE _____

**INFORMATION SHEET
FOR USE BY INDIVIDUAL OR HUSBAND AND WIFE**

The information contained on this form is confidential and for the use of Freedom Title Corporation and their underwriters. It will be used solely for the purpose of determining whether certain matters of record affect the title to the premises being insured under the above order number or whether these matters relate to the other persons with like or similar names. Please type or print.

Name of Parties and Social Security Number(s)

Name: _____ Social Security Number: _____

Date of Birth: _____

Name: _____ Social Security Number: _____

Date of Birth: _____

Maiden Name _____ Date of Marriage If Husband and Wife: _____

Present Address: _____ City _____ State _____

Other Address(es) that you either own, have owned, or resided in the last ten years.

Address: _____ City _____ State _____

Address: _____ City _____ State _____

Employment information and address(es)

Name of present employer _____ Address: _____

Name(s) and address(es) of other employer(s) in the last ten years

Employer _____ Address: _____

Employer _____ Address: _____

List below any divorce proceedings, name changes or uses of an alias, bankruptcy proceedings, or judgments and liens that affect the parties.

I/We the undersigned, hereby state that there are no outstanding judgments or liens nor have I/We files any recent bankruptcy proceedings other than the above, if any. I/We agree to hold Freedom Title Corporation and Chicago Title Insurance Company harmless from any claims which may result therefrom. I/We give this information to induce Freedom Title Corporation and Chicago Title Insurance Company to issue its title policy clear of any judgments, liens or bankruptcies affecting title.

Signature

Signature
