



Walker Office

201 5th Street North ~ P.O. Box 610
Walker, MN 56484
Ph: 218.547.7500 Fax: 218.547.7501
leertitle@arvig.net

Bemidji Office

2300 24th Street Nw Ste 104
Bemidji, MN 56601
Ph 218.333.6968 Fax: 218.333.6936
leertitle@leertitle.com

Park Rapids Office

104 Park Avenue N Ste 201
Park Rapids, MN 56470
Ph: 218.237.7550 Fax: 218.237.7554
leer@arvig.net

LENDER INFORMATION

Company Name: _____ Address: _____
Phone Number: _____ Fax: _____ Email: _____
Loan Officer: _____
Loan Type: _____ Loan Amount: _____ Transaction Type: _____

SERVICES REQUESTED

Title Insurance Only: ____ Yes ____ No
Close Transaction: ____ Yes ____ No
Provide Plat Drawing: ____ Yes ____ No Perform Construction Draws: ____ Yes ____ No
First Mortgage: ____ Yes ____ No Second Mortgage: ____ Yes ____ No Jr Lien: ____ Yes ____ No

PROPERTY INFORMATION

Legal Description: _____
Address: _____
Parcel Id: _____

PRESENT FINANCING

Name of Lender: _____ Loan #: _____
Phone number: _____
Second Mortgage Co Name: _____ Loan #: _____
Phone number: _____
Contract for Deed Holder: _____
Address: _____ Phone: _____

BORROWER'S INFORMATION

Borrower's Names: _____
Address: _____
Home Phone: _____ Business Phone: _____
Fax: _____ Email: _____
Attorney's Name and Phone: _____
Buyer's attend closing: ____ Yes ____ No Power of Attorney To Be Used? ____ Yes ____ No
Social Security # _____ Social Security # _____
Social Security # _____ Social Security # _____
Marital Status: _____ If corporation Provide Officer's Information _____

ADDITIONAL INFORMATION

