



Heyl Royster Real Estate & Title Services

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Phone 309.691.7770
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REQUEST FOR TITLE INSURANCE

Date of Order _____ Date of Closing _____ Date of Possession _____

Name/Company of Person Placing Order _____ Phone _____ Fax _____

Sale Price \$ _____ Earnest Money \$ _____ Tax I.D. # _____

Property Address _____

Property usage vacant single-family/condo multi-family commercial

Prior Title Evidence yes no **If yes, please forward. A discount will apply.**

Seller's Realtor _____ Listing Broker _____

Phone _____ Fax _____ Email _____

Seller's Name (s) _____
Last First Initial Phone SS# (Last four)

_____ Last First Initial Phone SS# (Last four)

Marital Status married parties to civil union single divorced widow(er) - County where death is recorded _____

Current Address _____ Email _____

Forwarding Address _____

Was property owned and occupied by seller for more than 2 years? Yes No

Buyer's Realtor _____ Buyer's Broker _____

Phone _____ Fax _____ Email _____

Buyer's Name (s) _____
Last First Initial Phone

_____ Last First Initial Phone

Marital Status married parties to civil union single divorced widow(er) - County where death is recorded _____

Current Address _____ Email _____

How Will Title Be Taken? joint tenancy solely entirety tenants in common
 trust **If trust, please provide copy of trust agreement.**

Will property be owner-occupied? yes no

Buyer's Lender _____ Loan Amount _____

Loan Officer _____ Phone _____ Fax _____ Email _____

Commission Rate _____ Split _____

Termite Done by _____ Cost \$ _____

Inspections Done by _____ Cost \$ _____

Please send previous Title Policy and Real Estate Contract with Order Form