STATEMENT OF INFORMATION

Why are you asked to provide personal information about yourself?

The questions asked on this form are personal and it is vital to a smooth transaction and for your protection that we ask the very questions we do.

You are purchasing or selling real property on which a title insurance policy will be issued. Because the title company issues a policy insuring your title and rights to the property, your personal information is used, in confidence, to determine whether the property is affected by various matters such as judgments, income tax liens, bankruptcies, etc. Unless the title company can clearly determine through their search of the public records, that there is only a similarity of names, and no other relationship, matters of public record may cloud the title to your property or your interests in the property and affect the nature of the title insurance coverage.

Even the most unusual names are surprisingly common in the United States. In California questions arise concerning your spouse due to California's Community Property Laws. The answers to those questions, and the others, help us sort out you from those with similar names.

The more completely you supply information on this form, the quicker and more efficiently the title company can provide the title policy and related services.

As the escrow holder we comply with the Privacy Act and do our part in protecting you and this information.

If you have any questions we are always happy to answer them.

Thank you for your understanding.

Statement of Information

CONFIDENTIAL - TO BE USED ONLY IN CONNECTION WITH ORDER NO.: _____

Note: This form is needed in order to eliminate judgments and liens against people with similar names.

STREET ADDRESS of property in this transaction: Address: City, State, Zip: PARTY 1 FIRST MIDDLE LAST FORMER LAST NAME(S), IF ANY SOCIAL SECURITY NO. DRIVER'S LICENSE NO. BIRTHPLACE BIRTHDATE FORMER SPOUSE/ REGISTERED DOMESTIC PARTNER NAME SPOUSE/ REGISTERED DOMESTIC PARTNER NAME **OCCUPATIONS FOR LAST 10 YEARS** PRESENT OCC. FIRM NAME ADDRESS NO. OF YEARS PREVIOUS OCC. FIRM NAME **ADDRESS** NO. OF YEARS **RESIDENCES FOR LAST 10 YEARS** NO. **STREET** FROM / TO CITY STATE **PARTY 2 MIDDLE** FORMER LAST NAME(S), IF ANY LAST SOCIAL SECURITY NO. DRIVER'S LICENSE NO. BIRTHPLACE **BIRTHDATE** SPOUSE/ REGISTERED DOMESTIC PARTNER NAME FORMER SPOUSE/ REGISTERED DOMESTIC PARTNER NAME **OCCUPATIONS FOR LAST 10 YEARS** PRESENT OCC. **ADDRESS** FIRM NAME NO. OF YEARS PREVIOUS OCC. FIRM NAME NO. OF YEARS ADDRESS **RESIDENCES FOR LAST 10 YEARS** NO. STREET CITY **STATE** FROM / TO MARRIAGE OR REGISTERED DOMESTIC PARTNERSHIP BETWEEN PARTIES 1 AND 2 ○ REGISTERED DOM. PARTNERES DATE OF MARRIAGE/ DOM. PARTNERSHIP: MARRIED I/WE HEREBY AUTHORIZE LENDERS TO RELEASE PAYOFF INFORMATION, IN WRITING OR VERBALLY, TO **Signatures** Date **Home Phone Business Phone**