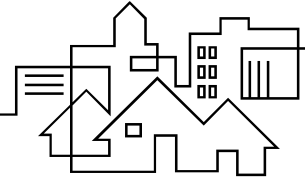


MG TITLE

RESIDENTIAL + COMMERCIAL TITLE + ESCROW SERVICES



TO: MG Title orders@mgtitlellc.com **OR** 202 521-1802 (fax)
RE: New Title Request

Company: _____ **Phone/Fax:** _____ / _____

Contact: _____ **Email:** _____

Transaction details: 1. Sale Refinance
2. Residential Commercial

If **sale:** Copy of sales contract is attached will follow
Is recent survey available Yes No (if **yes**, please forward immediately)

If **refinance:** Copy of Loan Application, General Release Authorization is attached will follow
Will there be any change in title Yes No If yes, identify: _____

Subject Property:

Lot: _____ Block: _____ Square: _____ Subdivision: _____

Address: _____

Borrower/Purchaser:	Name(s)	SS#	Tel#
_____	_____	_____	_____
_____	_____	_____	_____

Loan Information: Lender/Mortgagee Clause	Loan Amount	CPL Address
_____	\$ _____	_____
_____	_____	_____
_____	Or <input type="checkbox"/> Cash	_____

Paying Off:	Lender	Account #	Notes
_____	_____	_____	_____
_____	_____	_____	_____

Proposed Settlement Date: _____ **Time:** _____

Location: McLean, VA Laurel, MD Washington, DC
 Outside closing (identify) _____

Promotional Code (if any): _____	Notes/Comments: _____ _____
--	---------------------------------------