

**TITLE ORDER FORM  
NEW PURCHASE**

Palm Beach Title Services  
7731 N. Military Trail Suite 4  
Palm Beach Gardens, FL 33408  
Ph: 561-721-3450 Fax: 561-721-3455  
[PalmBeachTitle@PBTitle.net](mailto:PalmBeachTitle@PBTitle.net)

From: \_\_\_\_\_  
Company: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Date Ordered: \_\_\_\_\_  
Est. Closing Date: \_\_\_\_\_

Property Address:  
Street Address: \_\_\_\_\_  
City, Zip, County: \_\_\_\_\_

**Please Select:  Single Family  Condominium  Townhome  Vacant Land  Commercial**

**Owner/Seller:** \_\_\_\_\_  
SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ E-mail: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_

**Co-Owner/Seller:** \_\_\_\_\_  
SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ E-mail: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_

**Buyer/Borrower:** \_\_\_\_\_  
SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ E-mail: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_

**Co-Buyer/Borrower:** \_\_\_\_\_  
SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ E-mail: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_

**Lender Info - New Loan**  
Lender Contact: \_\_\_\_\_ New Loan Amt.: \_\_\_\_\_  
Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Purchase Price: \_\_\_\_\_

**Real Estate Broker Info:**  
**Listing Agent:** \_\_\_\_\_ Phone: \_\_\_\_\_  
E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_

**Selling Agent:** \_\_\_\_\_ Phone: \_\_\_\_\_  
E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_

**\*\*Payoff Information We MUST have a signed Borrower's Authorization, SSN, and correct loan info to obtain payoff statements\*\***

**1st Mortgage Lender:**  
\_\_\_\_\_  
Loan Number: \_\_\_\_\_ Phone: \_\_\_\_\_

**2nd Mortgage Lender:**  
\_\_\_\_\_  
Loan Number: \_\_\_\_\_ Phone: \_\_\_\_\_

**Name of HOA:** \_\_\_\_\_  
Contact: \_\_\_\_\_

**Name of POA:** \_\_\_\_\_  
Contact: \_\_\_\_\_

**May we contact seller for additional information needed to obtain payoffs?  Yes  No**

**Please fax with contract to: 561.721.3455**