

# INFORMATION SHEET

FOR USE BY INDIVIDUAL OR HUSBAND AND WIFE

Order Number: \_\_\_\_\_ Date: \_\_\_\_\_

The information contained on this form is confidential and for the use of Greater Indiana Title Company and the policy underwriter. It will be used solely for the purpose of determining whether certain matters of record affect the title to the premises being insured under the above order number or whether these matters relate to the other persons with like or similar names. Please type or print. NOTE: If additional space is required, attach on separate 8-1/2" x 11" sheet with a minimum of 1/2" clean margin on all sides.

Name of Parties and Social Security Number(s)

\_\_\_\_\_ Name

\_\_\_\_\_ Name

\_\_\_\_\_ Social Security Number

\_\_\_\_\_ Social Security Number

\_\_\_\_\_ Birth Date

\_\_\_\_\_ Birth Date

If Husband and Wife, Maiden Name \_\_\_\_\_ and date of Marriage: \_\_\_\_\_

Present Address: \_\_\_\_\_

Other Address(es) that you either own, have owned, or resided at since 2007:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Address of present employer:

\_\_\_\_\_

Name(s) and address(es) of other employer(s) since 2007:

\_\_\_\_\_  
\_\_\_\_\_

List below any divorce proceedings, name changes or uses of an alias, bankruptcy proceedings, or judgments and liens that affect the parties:

\_\_\_\_\_  
\_\_\_\_\_

I/We the undersigned, hereby state that there are no outstanding judgments or liens nor have I/We filed any recent bankruptcy proceedings other than the above, if any. I/We agree to hold Policy Issuing Agent and Chicago Title Insurance Company harmless from any claims which may result therefrom. I/We give this information to induce Policy Issuing agent and Chicago Title Insurance Company to issue its title policy clear of any judgments, liens or bankruptcies affecting title.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

