



219 South 10th Street, Suite #D
Lemoyne, PA 17043
Phone: (717) 975-3311 Fax: (717) 975-3399

Property Report Order Form

Please fax to (717) 975-3399 or email docs@completeclosingservices.com
Please send copy of Sales Agreement for Purchases

Date: _____
Agent: _____ Phone: _____ Cell: _____
Company: _____ Fax: _____
Bank or Broker: _____
Loan Officer: _____ Phone: _____
Proposed Lender: _____ Phone: _____
Loan Amount: \$ _____
Loan Type: (FHA) (FmHA) (Conv. Unins.) (VA) (Conv. Ins.) (Perm Constr.) (Temp Constr.) (USDA) (Adj.)
 Refinance
 Purchase
 Land Contract
 1st Mortgage
 2nd Mortgage/HELOC
Estimated Closing Date: _____

Property Information

Current Owner(s): _____
Home Phone: _____ Cell Phone: _____ Work Phone: _____
Property Address: _____
County: _____
Owner (1) SS#: _____ Owner (2) SS#: _____

Borrower Information

Borrower (1): _____ Borrower (2): _____
Borrower (1) SS#: _____ Borrower (2) SS#: _____
Borrower Address: _____
Home Phone: _____ Cell Phone: _____ Work Phone: _____
Purchase Price: \$ _____

Mortgages

1. Lender _____ Mortgage Amount \$ _____ Account # _____
2. Lender _____ Mortgage Amount \$ _____ Account # _____

(Please note: We must have Account # to obtain pay-off information)