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**BUYER'S INSURANCE AND LENDER INFORMATION SHEET**

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Date: \_\_\_\_\_

ESCROW NO.:

RE:

**Please provide us with the following information so that we can forward your loan representative the necessary paperwork and order the insurance coverage required by your lender. Please return this form with the escrow instruction package as soon as possible. This will help us to process your escrow in a timely manner.**

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**Insurance Information**

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INSURANCE AGENCY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

AGENT: \_\_\_\_\_

PHONE NUMBER: (\_\_\_\_\_) \_\_\_\_\_

FAX NUMBER: (\_\_\_\_\_) \_\_\_\_\_

POLICY NO.: \_\_\_\_\_

POLICY EFFECTIVE DATE: \_\_\_\_\_ EXPIRATION DATE: \_\_\_\_\_

ANNUAL PREMIUM AMOUNT: \_\_\_\_\_

Do you have a current policy with this agent:  Yes  No

If so, does this policy cover the above-referenced property?  Yes  No

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**New Loan/New Lender Information**

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LENDER/MORTGAGE COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

LOAN OFFICER: \_\_\_\_\_

PHONE NUMBER: (\_\_\_\_\_) \_\_\_\_\_

FAX NUMBER: (\_\_\_\_\_) \_\_\_\_\_

1st ESTIMATED LOAN AMT.: \_\_\_\_\_

2nd ESTIMATED LOAN AMT.: \_\_\_\_\_

Is the above company a mortgage broker?  Yes  No