



Atlas Title, LLC

903 Central Avenue • Dover, NH 03820 • Tel: (603) 743-0900 • Fax: (603) 743-1414

In order to insure a timely closing, we request your assistance with the following items.

Enclosed please find a short questionnaire to be filled out and returned to us **as soon as possible**. You may fax, email or mail the completed questionnaire. If our office is not to prepare the deed, please insure that a copy of the proposed deed is forwarded to us well in advance of the anticipated closing. We will not be able to establish a final closing date without the proposed deed in hand. If you would like us to prepare the deed, our fee is \$125.00, **(plan drawn deeds additional please call for quote)**, which would be deducted from your proceeds.

Please do your best in providing information about your mortgage(s). Many banks and mortgage companies will not give payoff information without a written request from us and the account number. Your help can avoid last minute payoff problems. If you have an "Equity Line" type mortgage, be advised that we will need a payoff amount for that as well. Please include that information on the enclosed form..

If you have any private (non-bank) mortgages on the property, please arrange to have the payoff amount calculated and a signed recordable discharge available prior to closing. We cannot disburse funds to you until private mortgages are satisfied and discharges are received.

If any sellers cannot attend the closing, they must sign the deed in advance of closing and provide a Power of Attorney (if we are to prepare the Power of Attorney, the fee is \$50.00). Please notify us in advance of closing so we can arrange to have the Power of Attorney properly prepared and executed. We must have the executed Power of Attorney prior to closing.

If this property is currently involved in foreclosure proceedings or a short sale please call this office with additional information we will need to service this closing, 603-743-0900.

Final sewer and water readings need to be called in before the closing.

If you have any questions regarding this closing, please feel free to contact one of our loan processors. Thank you for your anticipated help.

Very truly yours,

Atlas Title, LLC
File No: **11-52**
Fax #603-743-1414
Tel#603-743-0900

ATSlrLtr



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Please fill out this short questionnaire and return it to us **as soon as possible**. You may fax, email or mail the completed questionnaire. Timely receipt of this information will enable us to prepare the closing package with a minimum of delays.

1. Should Atlas Title, LLC prepare the deed on your behalf?

Yes____ No____

If the answer is NO please make sure that we have a copy of the proposed deed at least 72 hours prior to closing.

Name & Phone # of attorney preparing deed: _____

2. SELLER INFORMATION

E-Mail: _____

Name _____ Marital Status _____ Phone H# _____ W# _____

Cell Phone # _____ SS# _____ Post Closing Address _____

Name _____ Marital Status _____ Phone H# _____ W# _____

Cell Phone # _____ SS# _____ Post Closing Address _____

3. MORTGAGE INFORMATION-Seller's mortgages or equity lines currently on the property.

Name of Lender _____ Account # _____ FHA? YES/NO

Address _____ Phone # _____

4. Please list any other mortgages (private, equity, etc.) as well as additional deposits, condo prorations, closing credits, etc., that we should be aware of. (Use back of this form, if necessary).

5. IS THIS PROPERTY CURRENTLY IN THE PROCESS OF FORECLOSURE OR A SHORT SALE? YES NO
If yes please contact our office immediately at 603-743-0900 in order for us to obtain additional information..

6. CONTRACT INFORMATION

Real Estate Agent Name: _____ Phone: _____

SALE PRICE \$ _____ DEPOSIT \$ _____

Held by _____ Seller _____ Other _____ Phone # _____

Additional Information: _____

7. IS PROPERTY SERVICED BY MUNICIPAL SEWER _____ WATER _____

Please return this form in the mail as soon as possible or via FAX to expedite the closing process. Thank You.

IF CONDOMINIUM: Name & Number of Association: _____

Company name and number that holds insurance certificate: _____

PAYOFF AUTHORIZATION

Effective on December 15, 1989, federally chartered savings and loan associations and savings banks were required to obtain an authorization in writing from a customer in order to disclose payoff figures (FHLBE Reg. 89-2350).

To receive payoff figures, Atlas Title, LLC must be in receipt of the mortgagors consent form listing each lender holding a mortgage, equity line of credit, equity mortgage secured by the above-referenced property address. Please be sure to list the address(es) to which you currently make your payments.

Lender Name: _____

Lender Address: _____

Lender Phone # _____ Account # _____

Type of Loan: _____ (i.e. Conventional, FHA,VA, Home Equity, Commercial)

Lender Name: _____

Lender Address: _____

Lender Phone # _____ Account # _____

Type of Loan: _____ (i.e. Conventional, FHA,VA, Home Equity, Commercial)

Lender Name: _____

Lender Address: _____

Lender Phone # _____ Account # _____

Type of Loan: _____ (i.e. Conventional, FHA,VA, Home Equity, Commercial)

I/We hereby authorize and consent the above-named Lender(s) to release information to Atlas Title, LLC regarding payoff figures for the above-referenced accounts and understand that I/We may withdraw such authorization and consent at any time by notifying said institution in writing.

SS# _____ Signature _____

SS# _____ Signature _____

SS# _____ Signature _____

SS# _____ Signature _____

I, as agent for Atlas Title, LLC, agree to use information regarding the above-referenced accounts for the sole purpose of satisfying the above-referenced lien(s) in full. I receive and hold in confidence any and all information other than for the purpose stated above or to make any disclosure of information to a third party, except as permitted by the law and regulations.

Atlas Title, LLC

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