

**STATEMENT OF INFORMATION  
CONFIDENTIAL INFORMATION FOR YOUR PROTECTION**

Completion of this statement expedites your application for title insurance, as it assists in establishing identity, eliminating matters affecting persons with similar names and avoiding the use of fraudulent or forged documents. Complete all blanks (please print) or indicate "none" or "N/A." If more space is needed for any item(s), use the reverse side of the form. Each party (and spouse/domestic partner, if applicable) to the transaction should personally sign this form.

ESCROW NO.: \_\_\_\_\_ TITLE NO.: \_\_\_\_\_

**NAME AND PERSONAL INFORMATION**

\_\_\_\_\_  
First Name Middle/Maiden name Last Name  
*(If none, indicate)*

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Birthplace: \_\_\_\_\_ Social Security No.: \_\_\_\_\_ Driver's License No.: \_\_\_\_\_

List any other name you have used or been known by: \_\_\_\_\_

State of residence: \_\_\_\_\_ I have lived continuously in the U.S.A. since \_\_\_\_\_

Are you currently married? \_\_\_\_\_ If yes, complete the following information:

Date and place of marriage: \_\_\_\_\_

Spouse: \_\_\_\_\_

\_\_\_\_\_  
First Name Middle/Maiden name Last Name  
*(If none, indicate)*

Business Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Birthplace: \_\_\_\_\_

Social Security No.: \_\_\_\_\_ Driver's License No.: \_\_\_\_\_

Are you currently a registered domestic partner? \_\_\_\_\_ If yes, complete the following information:

Domestic Partner: \_\_\_\_\_

\_\_\_\_\_  
First Name Middle/Maiden name Last Name  
*(If none, indicate)*

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Birthplace: \_\_\_\_\_ Social Security No.: \_\_\_\_\_ Driver's License No.: \_\_\_\_\_

List any other name you have used or been known by: \_\_\_\_\_

State of residence: \_\_\_\_\_ I have lived continuously in the U.S.A. since \_\_\_\_\_

**RESIDENCES (LAST 10 YEARS)**

\_\_\_\_\_  
Number & Street City From (date) to (date)

\_\_\_\_\_  
Number & Street City From (date) to (date)

*(If more space is required, use reverse side of form)*

**OCCUPATIONS/BUSINESSES (LAST 10 YEARS)**

\_\_\_\_\_

Firm or Business name

Address

From (date) to (date)

Firm or Business name

Address

From (date) to (date)

*(If more space is required, use reverse side of form)*

**SPOUSE'S/DOMESTIC PARTNER'S OCCUPATIONS/BUSINESSES (LAST 10 YEARS)**

Firm or Business name

Address

From (date) to (date)

Firm or Business name

Address

From (date) to (date)

*(If more space is required, use reverse side of form)*

**PRIOR MARRIAGE(S)**

Any prior marriages for either spouse? \_\_\_\_\_ If yes, complete the following:

Prior spouse's name: \_\_\_\_\_ Prior Spouse of Husband: \_\_\_\_\_

Marriage terminated by: Death \_\_\_\_\_ Divorce \_\_\_\_\_ Date of termination: \_\_\_\_\_

Prior spouse's name: \_\_\_\_\_ Prior Spouse of Husband: \_\_\_\_\_

Marriage terminated by: Death \_\_\_\_\_ Divorce \_\_\_\_\_ Date of termination: \_\_\_\_\_

*(If more space is required, use reverse side of form)*

**PRIOR DOMESTIC PARTNERSHIP(S)**

Any prior domestic partnerships for either person? \_\_\_\_\_ If yes, complete the following:

Prior partner's name: \_\_\_\_\_ Prior Partner: \_\_\_\_\_

Partnership terminated by: Death \_\_\_\_\_ Dissolution \_\_\_\_\_ Nullification \_\_\_\_\_ Termination \_\_\_\_\_

Date of termination: \_\_\_\_\_

Prior partner's name: \_\_\_\_\_ Prior Partner: \_\_\_\_\_

Partnership terminated by: Death \_\_\_\_\_ Dissolution \_\_\_\_\_ Nullification \_\_\_\_\_ Termination \_\_\_\_\_

Date of termination: \_\_\_\_\_

*(If more space is required, use reverse side of form)*

**INFORMATION ABOUT THE PROPERTY**

Buyer intends to reside on the property in this transaction: Yes \_\_\_\_\_ No \_\_\_\_\_

**OWNER TO COMPLETE THE FOLLOWING ITEMS**

Street Address of Property in this transaction: \_\_\_\_\_

The land is unimproved \_\_\_\_\_; or improved with a structure of the following type:

A Single or 1-4 Family \_\_\_\_\_ Condo Unit \_\_\_\_\_ Other \_\_\_\_\_

Improvements, remodeling or repairs to this property have been made within the past six months: Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, have all costs for labor and materials arising in connection therewith been paid in full? Yes \_\_\_\_\_ No \_\_\_\_\_

Any current loans on property? \_\_\_\_\_ If yes, complete the following:

Lender: \_\_\_\_\_ Loan Amount: \_\_\_\_\_ Loan Date: \_\_\_\_\_

Lender: \_\_\_\_\_ Loan Amount: \_\_\_\_\_ Loan Date: \_\_\_\_\_

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The undersigned declare, under penalty of perjury, that the foregoing is true and correct.

Executed on \_\_\_\_\_, \_\_\_\_\_ at \_\_\_\_\_

Signature: \_\_\_\_\_ Signature: \_\_\_\_\_

*(NOTE: IF APPLICABLE, BOTH SPOUSES/DOMESTIC PARTNERS MUST SIGN.)*

**THANK YOU**