



L A W O F F I C E S O F
DAVID M. LAWLER
I N C O R P O R A T E D
EXCEPTIONAL CLOSINGS • EXCEPTIONAL SERVICE

REQUEST FOR TITLE

To: (Name and address of title company)

David M. Lawler
3617 Braselton Highway, Suite 104
Dacula, GA 30019
(p) 770-904-5115 / (f) 770-5119

From: (Contact Information for Requesting Party)

Name:
Company:
Address:

Phone/Fax:
Email:

Name and address of loan applicant(s):

Name(s):
Address:

Phone: (h) _____ (w) _____
Social Security Number(s): Borrower 1 -

Borrower 2 -

Property Information:

Occupancy Status

- Primary Residence
 Second Home
 Investment Property

Loan Purpose

- Purchase
 Cash-Out Refi
 No Cash-Out Refi

Sales Price:

\$ _____

Loan Amount:

\$ _____

Property Address:

Seller's Name and Phone Number (if applicable):

Mortgagee Clause for NEW LOAN:

Special Instructions:

Date of Request: _____

Estimated Closing Date: _____