

**Lawyers Title Insurance Corporation
STATEMENT OF INFORMATION**

CONFIDENTIAL INFORMATION STATEMENT TO BE USED IN CONNECTION WITH ORDER NO:
COMPLETION OF THIS FORM WILL EXPEDITE YOUR ORDER AND WILL HELP PROTECT YOU.

THE STREET ADDRESS of the property in this transaction is:

IF NONE LEAVE BLANK

ADDRESS _____ CITY _____

IMPROVEMENTS: SINGLE RESIDENCE MULTIPLE RESIDENCE COMMERCIAL
OCCUPIED BY: OWNER LESSEE TENANTS
ANY PORTION OF NEW LOAN FUNDS TO BE USED FOR CONSTRUCTION YES NO

NAME			SPOUSES NAME		
FIRST _____	MIDDLE _____	LAST _____	FIRST _____	MIDDLE _____	LAST _____
BIRTHPLACE _____		BIRTH DATE _____	BIRTHPLACE _____		BIRTH DATE _____
I HAVE LIVED IN CALIFORNIA SINCE _____		SOCIAL SECURITY NUMBER _____	I HAVE LIVED IN CALIFORNIA SINCE _____		SOCIAL SECURITY NUMBER _____
DRIVER'S LICENSE NO. _____			DRIVER'S LICENSE NO. _____		
WIFE'S MAIDEN NAME _____					
WE WERE MARRIED ON _____			AT _____		

RESIDENCE(S) FOR LAST 10 YEARS

NUMBER AND STREET _____	CITY _____	FROM _____	TO _____
NUMBER AND STREET _____	CITY _____	FROM _____	TO _____
NUMBER AND STREET _____	CITY _____	FROM _____	TO _____
NUMBER AND STREET _____	CITY _____	FROM _____	TO _____

OCCUPATION(S) FOR LAST 10 YEARS

HUSBAND			
PRESENT OCCUPATION	FIRM NAME	ADDRESS	NO. OF YEARS
PRIOR OCCUPATION	FIRM NAME	ADDRESS	NO. OF YEARS
PRIOR OCCUPATION	FIRM NAME	ADDRESS	NO. OF YEARS
WIFE			
PRESENT OCCUPATION	FIRM NAME	ADDRESS	NO. OF YEARS
PRIOR OCCUPATION	FIRM NAME	ADDRESS	NO. OF YEARS
PRIOR OCCUPATION	FIRM NAME	ADDRESS	NO. OF YEARS

FORMER MARRIAGES: IF NO FORMER MARRIAGES, WRITE "NONE" _____

NAME OF FORMER SPOUSE _____

IF DECEASED: DATE _____ WHERE _____

CURRENT LOAN ON PROPERTY

PAYMENTS ARE BEING MADE TO:

1. _____ 2. _____

3. _____

HOMEOWNERS ASSOCIATION _____ NUMBER () _____

DATE _____ SIGNATURE _____

HOME PHONE _____ BUSINESS PHONE _____