



**ACCURATE
GROUP**

Title Order Sheet

Accurate Group ECRES
9013 Perimeter Woods Drive, Suite H
Charlotte NC, 28216
Phone: 888-258-5757

Order Number: 2366573-9

Order Date: 2/15/22 07:51 pm

Order Type: 1E-One Owner Equity

Assigned Date: 3/25/22 10:52 am

Abstractor: SLK Global Solutions America Inc.

Abstractor Fee: \$ 11.50

Vendor ID: 56124

BORROWER William smith

Address: 400 E 55TH ST, CHICAGO

County: Cook

ORDER INSTRUCTIONS

Special Instructions:

PIN/APN: 10 20-14-202-076-1279

-Client 5149-

Please provide a CURRENT OWNER SEARCH: Search must be back to a full value transfer of deed. Chain of title must (means of conveyance) include all deeds chaining back 30 years or beyond, until FVD is found

*****IMPORTANT*****

Please see the lender provided mortgage information in the Vendor Special Instructions Above. ALERT- if the listed mortgage is NOT found please STOP and contact orders@accurategroup.com and we will verify next stops with our client

This order is due back 24 hours or less after assignment. (With the exception of weekends and legal holidays) If there will be a delay for any reason, please contact our office immediately.

[] If our borrower is NOT currently vested, please STOP and contact orders@accurategroup.com for next steps ***IMPORTANT***

[] YOU MUST COMPLETE THIS ORDER ON THE ATTACHED WRITE UP SHEET INCLUDING THE COMPLETION OF TAX INFORMATION ON THE WORKSHEET BELOW

[] List any open mortgages

[] List any judgments and Involuntary Liens on all parties in the chain

[] List a full year of tax information

We REQUIRE THE FOLLOWING COPIES:

[] FULL COPIES of all deeds

[] FULL COPIES of any and all mortgages and/or deeds of trust

[] Tax Assessor Card

[] Parcel Card with acreage or lot reference

[] Additional deeds should only be included if they clear a title cloud

[] Copies of any assignments pertaining to our property

[] FULL COPIES of any and all JUDGMENTS and INVOLUNTARY LIENS. If there are more than five Judgment liens, please call our office for instructions prior to getting copies.

Regarding invoicing- If the base fee is not correct please contact our office for approval prior to completing the search. If additional costs are to be incurred, due to copies or a longer search required, please be sure to enter a "request fee change" in our vendor portal prior to uploading the completed search. If Copy fees exceed \$30.00, please contact our office for approval. (No separate invoices necessary, as this will serve as the invoiced pricing)

PRODUCT DELIVERY INSTRUCTIONS

ATG Vendor Portal --- <https://title.accurategroup.com/>
1455 Fax: 888 577 1871

Email: orders@accurategroup.com

Phone: 704-892-3352 xt

TAX WORKSHEET

Tax Parcel ID Number:

Pin Number / Account Number:

Township:

PRIOR TAXES PAID?

Yes

No

Tax Sale?

Yes

No

For All Taxes:

Verify Payment of real property taxes for past ten years.
PRINT CURRENT TAX BILLING

For all Assessments:

Check for the existence of pending or confirmed assessments.
PRINT CURRENT ASSESSMENT INFORMATION OR PROVIDE NAME
AND DATE OF SOURCE.

Assessments:

Land \$

Improvement: \$

Total: \$

List each tax separately below.

| TAX YEAR | TAX TYPE | TAX PERIOD | STATUS | AMOUNT | DUE DATE | DELINQUENT DATE | PAID DATE |
|----------------|---------------------------|-------------------------------|----------------|----------------------|----------|-----------------|-----------|
| List each year | City, County, School etc. | Annual, Summer, 1st half etc. | Paid, Not paid | List each seperately | | | |
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☐ Homestead Exemption

☐ Other Exemption

Amount: \$

Exemption %

Notes:



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One Owner Equity Work Sheet - continued

Accurate Group ECRES
9013 Perimeter Woods Drive, Suite H
Charlotte NC, 28216
Phone: 888-258-5757

Order Number: 2366573-9

Order Date: 03/25/2022

| | | |
|--|-------------------------|---------------------|
| Abstractor: SLK Global Solutions America Inc. | Vendor ID: 56124 | Fee: \$11.50 |
|--|-------------------------|---------------------|

| | | |
|---------------------------------|--|-------------------------|
| Borrower: BOBBY BANKRUPT | Address: 11 CORELOGIC DR., NEW YORK,NY, 10001 | County: New York |
|---------------------------------|--|-------------------------|

| | | |
|--------------------------------------|--|--------------------------------|
| Effective Date: _____ | | |
| Present Recorded Owner: _____ | | |
| Dated: _____ | Volume/Instrument Number: _____ | Consideration: \$ _____ |
| Recorded: _____ | Page: _____ | |

| | | |
|--|--|-----------------------------|
| If no mortgages, please check the box: <input type="checkbox"/> | | |
| Mortgage To: _____ | | |
| Mortgage From: _____ | | |
| Dated: _____ | Volume/Instrument Number: _____ | Amount: \$ _____ |
| Recorded: _____ | Page: _____ | Open Ended? Yes / No |
| Maturity Date: _____ Trustee: _____ | | |
| Assigned To: _____ | Date: _____ | Book/Page: _____ |
| Modification Recorded Date: _____ | Book/Page: _____ | Reason: _____ |
| Mortgage To: _____ | | |
| Mortgage From: _____ | | |
| Dated: _____ | Volume/Instrument Number: _____ | Amount: \$ _____ |
| Recorded: _____ | Page: _____ | Open Ended? Yes / No |
| Maturity Date: _____ Trustee: _____ | | |
| Assigned To: _____ | Date: _____ | Book/Page: _____ |

Modification Recorded Date: _____ **Book/Page:** _____ **Reason:** _____

| | | |
|--|--------------------|-------------------------|
| Liens (Judgment, Mechanic, Federal, State, LP, Divorce, etc...) | | |
| Case Number: _____ | Type: _____ | Amount: \$ _____ |
| Plaintiff: _____ | | |
| Defendant: _____ | | |
| Case Number: _____ | Type: _____ | Amount: \$ _____ |
| Plaintiff: _____ | | |
| Defendant: _____ | | |
| Case Number: _____ | Type: _____ | Amount: \$ _____ |
| Plaintiff: _____ | | |
| Defendant: _____ | | |

Check if additional deeds, liens, or mortgages are listed on additional page(s) ☐