



516 Burchett St., Glendale, CA 91203
Phone: (818) 662-6700 • Fax: (818) 662-6780

Date:

ESCROW NO.:

TITLE NO.:

YOU AS ESCROW HOLDER ARE AUTHORIZED TO SHOW VESTING ON THE GRANT DEED TO RECORD AS FOLLOWS:

Names: _____

PLEASE MARK APPROPRIATE CHOICE FOR STATUS:

- ____ Husband and Wife
____ Wife and Husband
____ A Married Couple
____ A Single Man (never married)
____ A Single Woman (never married)
____ A Single Person (never married)
____ A Married Man (as his sole and separate property)*
____ A Married Woman (as her sole and separate property)*
____ A Married Person (as his/her sole and separate property)*
* Please indicate name of spouse so interspousal deed may be drawn:

- ____ An Unmarried Man (divorced)
____ An Unmarried Woman (divorced)
____ An Unmarried Person (divorced)
____ A Widow (spouse deceased)
____ A Widower (spouse deceased)
____ Registered Domestic Partners

PLEASE MARK APPROPRIATE CHOICE FOR VESTING:

- ____ Community Property
____ Community Property with Right of Survivorship
____ Joint Tenants
____ Tenants In Common (Please Give Interest Amounts)
____ Sole and Separate Property (If Married or Domestic Partnership, an Interspousal Grant Deed, A Quitclaim Deed, Statement Of Information and Appropriate Instructions Will Need To Be Submitted.)
____ Partnership (Limited Or General) _____
____ Corporation (California Or Other State) _____
____ A Trust (attach copy of Trust Agreement)
____ Other _____

Escrow Holder advises the parties hereto to seek legal counsel with their attorney and/or accountant as to how they should hold title.

(vesting information)



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WIRING INFORMATION

Escrow No.:

Title No.:

TO: Pacific Coast Title Company
516 Burchett St.
Glendale, CA 91203

BANK: Nano Banc, 7700 Irvine Center Drive, Suite 700, Irvine, CA 92618

ROUTING NO: 122245251

ACCOUNT NO: Credit to Pacific Coast Title Company in trust for
account number 6100100846

PLEASE REFER TO OUR ESCROW NO.

WIRED FUNDS are preferred, as the funds are immediately posted and available.

ANY CASHIER CHECKS should be made payable to Pacific Coast Title Company, reference the escrow number noted above. Funds received by Cashier's Checks require overnight clearing prior to any close of escrow.

Personal checks require bank clearance and your proof from your bank of your paid check.

Delays in closing are likely if these guidelines are not followed. Pacific Coast Title Company does not accept any responsibility for these delays to your closing.

Please Note: Our office does not accept ACH transfers. These instructions are for the purpose of sending wire transfers only.

NOTE THE FOLLOWING IS NOT ACCEPTABLE AND CAN *SIGNIFICANTLY DELAY YOUR CLOSING*:

OFFICIAL CHECKS & CERTIFIED CHECKS - are not a Cashier's Check and are subject to a waiting period of 3-7 days and verification of cleared funds.

ON-LINE TRANSFERS OR ACH CREDITS- these can be recalled by the sender and therefore are not acceptable as they do not meet existing government guidelines of "Good Funds". Your bank may offer this option at a lower cost, DO NOT ACCEPT!

DIRECT DEPOSIT- This could cause a significant delay in your closing.

(wire info-domestic)



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BUYER'S ESCROW INFORMATION SHEET

Escrow No.:
Title No.:

PLEASE FILL OUT THIS FORM COMPLETELY AND RETURN TO OUR OFFICE AS SOON AS POSSIBLE
AS IT WILL ASSIST US IN THE ADMINISTRATION OF YOUR TRANSACTION.

1. Buyer(s): _____
Buyer # 1 Phone: _____ Buyer # 2 Phone: _____
E-Mail Address: _____ Email Address: _____
Social Security #: _____ Social Security #: _____
Buyer(s) Current Mailing Address: _____

2. Buyer(s) Mailing Address After Close Of Escrow: _____

3. New Loan(s) Buyer(s) Are Applying For:

Name Of Lender: _____
Address: _____
Loan Officer: _____ Phone Number: _____
Email Address: _____
Address: _____
Loan Processor: _____ Phone/Email: _____

5. New Insurance:

Agent's Name: _____ Phone _____
Agent's Address: _____
Insurance Company: _____ Email: _____

Please place any additional information that you feel we may require on the reverse side of this form.

Dated: _____

PLEASE COMPLETE, DATE, SIGN AND RETURN

**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.

To: Pacific Coast Title Company
516 Burchett St., Glendale, CA 91203

ESCROW NO.:
TITLE NO.:

NAME AND PERSONAL INFORMATION

First Name Middle Name Last Name Maiden Name Date of Birth _____
(If none, indicate)

Home Phone _____ Business Phone _____ 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: _____ Date of Birth _____
First Name Middle Name Last Name Maiden Name
(If none, indicate)

Home Phone _____ Business Phone _____ Birthplace _____

Social Security No. _____ Driver's License No. _____

List any other names you have used or been known by _____

State of residence _____ I have lived continuously in the U.S.A. since _____

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

Domestic Partner: _____ Date of Birth _____
First Name Middle Name Last Name Maiden Name
(If none, indicate)

Home Phone _____ Business Phone _____ Birthplace _____

Social Security No. _____ Driver's License No. _____

List any other names 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)

ESCROW NO.:

TITLE NO.:

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 (Party A) name: _____ Prior Spouse of Party A: _____

Marriage ended by: Death _____ Divorce _____ Date of Death/Divorce _____

Prior spouse's (Party B) name: _____ Prior Spouse of Party B: _____ Spouse _____

Marriage ended by: Death _____ Divorce _____ Date of Death/Divorce _____

(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 ended by: Death _____ Dissolution _____ Nullification _____ Termination _____ Date of Death/Dissolution/etc. _____

Prior partner's name: _____ Prior Partner: _____

Partnership ended by: Death _____ Dissolution _____ Nullification _____ Termination _____ Date of Death/Dissolution/etc. _____

(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 Account # _____

Lender _____ Loan Amount _____ Loan Account # _____

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.