	CHILDREN BY CURRENT OR PREVIOUS MARRIAGE			ADDITIONAL CHILDREN (if applicable)				
CHILDREN	NAME	RIRTHDATE						
	NAME							
	NAME	BIRTHDATE						
Buyer intends to resid	le on the property in this transaction.			re space is needed, use reverse side of form)				
	THIS PORTION TO BE COMPLETED BY	THE SELLER (INCLU	JDING ABO	OVE PORTIONS)				
The Street Address of the	property in this transaction is							
The land is unimproved π	; or improved with a structure of the followin	g type; a Single or 1 to	4 Family π	${\mathfrak l}$; a Condominium Unit ${\mathfrak m}$; Other ${\mathfrak m}$				
Improvements, remodeling or repairs to this property have been made within the past six months. yes π no π								
If yes, have all costs for lal	oor and materials arising in connection therew	yes π	π no π					
The Undersigned declare,	under penalty of perjury, that the foregoing is	true and correct.						
Executed on	, at							
Signature:		Spouses Signature:						
Home Phone:	E	Business Phone:						
:		Page 2						

STATEMENT OF IDENTITY

For confidential use byÁÚa	æãã&ÁÔ[æcTitle Company only in	connection with	its APPLICAT	ΓΙΟΝ ΝΟ	ORDER/ESCR	OW NO		
In searching your title we	ompleted and SIGNED PERSON , en. This information is necessary may encounter judgements, band ch matters which otherwise clou	kruptcies, divord and the title to the	ces, and incom nis property if	ne-tax liens against pers you will help us by C	ons with names OMPLETELY fill	similar to yours. We		
	(First Name)		(Full middle na	ame-if none, indicate)	(Last	Name)		
MY FULL NAME	BIRTHPLACE	DATE OF BIRTH						
	SOCIAL SECURITY NO.	I HAVE LIVED CONTINUOUSLY IN THE USA SINCE						
	BUSINESS PHONE			HOME PHONE _				
	DRIVER'S LICENSE NO							
	(IF MARRIED, COMPLETE THE FOLLOWING)							
	FULL NAME OF SPOUSE	(First Name)	(Ful	I middle name-if none, i	ndicate)	(Last Name)		
SPOUSE	BIRTHPLACE							
	SOCIAL SECURITY NO		I HAVE L	IVED CONTINUOUSLY	' IN THE USA SII	NCE		
	BUSINESS PHONE	HOME PHONE						
	DRIVER'S LICENSE NO							
	WE WERE MARRIED ON							
	WIFE'S MAIDEN NAME	, ,			,			
	RESIDENCES							
	Number and Stree	t	City	From (Date)	Т	o (Date)		
RESIDENCES	Number and Stree	t	City	From (Date)	Т	o (Date)		
OCCUPATIONS DURING PAST 10 YEARS	(LILIODANIDIO)	OCCUPATIONS						
	(HUSBAND'S)	Firm Name	Firm Name Location		Location			
		Firm Name	ne Location					
	(WIFE'S)	Firm Name			Location			
		Firm Name	ace is needed	, use reverse side of for	Location			
ANY FORMER MARRIAGE OR MARRIAGES					·			
	IF NO FORMER MARRIAGE FOLLOWING:	GES, WRITE '	'NONE"	OTHERW	/ISE, PLEASE	COMPLETE THE		
	NAME OF FORMER WIFE	≣						
	Deceased D	Divorced	When	Where				
	NAME OF FORMER HUSBAND							
				Where use reverse side of				
•		•			•			

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