



ORSYN ABSTRACTS

Title & Settlement

42-40 Bell Blvd. Suite 400, Bayside, New York 11361

Fax: (718) 423-2200

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TITLE ORDER FORM

APPLICANT'S INFO

Applicant: _____ Date: _____

Company: _____

Address: _____

Telephone #: _____ Fax#: _____

PROPERTY INFO.

Premises: _____

District: _____ Section: _____ Block: _____ Lot: _____

Type of Premise: 1-3 Dwelling _____ 4 or more dwelling _____ Commercial _____ Vacant _____

Cooperative _____ Condominium _____

REFINANCE

Loan Amount \$ _____ Lender: _____

Borrower(s) name: _____

Lender's Attorney

Name: _____

Firm: _____

Address: _____

Tel: _____ Fax: _____

PURCHASE

Purchase Amount \$ _____ Lender: _____

1st Loan \$ _____ 2nd Loan \$ _____

Seller(s) name: _____

Purchaser(s) name _____

Seller(s) Attorney

Name: _____

Firm: _____

Address: _____

Tel: _____ Fax: _____

Purchaser(s) Attorney

Name: _____

Firm: _____

Address: _____

Tel: _____ Fax: _____

COMMENTS:
