

Sioux City, IA 51101 Phone 712-224-3669 Fax 712-224-3670

Email: info@closingsiouxland.com

Loan Officer:					
Closing Date:					
Loan Type: Conventional F	AV 🗌 AH	☐ ARM	☐ Other:		
Loan Purpose: Purchase REI	∃ □ Cons	truction 🗌	] Other:		
Loan Amount:	an Amount: Loan N				
Property Address:					
City:	;	State: Zip:			
Legal Description (if Known):				<u> </u>	
Damassa		. 1422		and mark out out out.	
Borrower:					
DOB:		Pnon	ne:		
Borrower:		SSN:		marital status:	
DOB:					
Attorney for opinion:		Abst	ractor preference	o:	
Termite inspection needed?	☐ Yes	□No	Preferred inspe	ector:	
Iowa Title Guaranty?	☐ Yes	□No			
Closing Protection Letter (CPL)?	☐ Yes	□No			
Title Insurance?	☐ Yes	□No			
Chain of Title?	☐ Yes	□No			
Written Search (REFI)?	☐ Yes	□No			
Buyer Search?	☐ Yes	□No			

Please include first page of 1003 with order.