



Inland Professional Title, LLC

A Locally Owned and Operated Title & Escrow Company

PHONE: 922-2222
FAX: 926-1519
891-6835

CLOSING / RECORDING INSTRUCTIONS

FROM: _____ DATE: _____
ADDRESS: _____ IPT FILE #: _____
CITY: _____ YOUR CUST FILE #: _____

INLAND PROFESSIONAL TITLE TO PROCEED AS FOLLOWS:

HOLD UNTIL FURTHER ADVISED. RECORD ON _____
 PHONE VERBAL TO: _____ AT _____
AND _____ AT _____

TYPE OF DOCUMENT	GRANTOR/GRANTEE	RECORDING NO.
1		
2		
3		
4		
5		

TAXES: EXCISE AFFIDAVIT CHECK FOR EXCISE TAX
 PAY PER CHECK ATTACHED CHECK TO FOLLOW
 FIRST HALF PAID IN FULL
ASSESSMENTS: PAY PER CHECK ATTACHED CHECK TO FOLLOW
 FIRST HALF PAID IN FULL

PAYMENTS:

TITLE PREMIUM IN AMOUNT OF: \$ _____
RECORDING FEES IN AMOUNT OF: \$ _____
EXCISE TAX IN AMOUNT OF: \$ _____
TAXES & ASSESSMENTS IN AMOUNT OF: \$ _____
OTHER: \$ _____
TOTAL ENCLOSED: \$ _____

INSTRUCTIONS FOR SUPPLEMENTAL REPORT

SEND WITH / WITHOUT COPIES OF RECORDED DOCUMENTS TO: _____
 PLEASE SEND COPIES OF RECORDED DOCUMENTS TO: _____
 PLEASE ISSUE POLICY

ADDITIONAL RECORDING INSTRUCTIONS _____

POLICY INSTRUCTIONS

ISSUE POLICY SHOWING TITLE IN _____
 WE REQUEST DELETION OF ITEMS NUMBERED _____
AT CLOSING WE GUARANTEE TO OBTAIN AND TO DELIVER FOR RECORDATION DOCUMENTATION NECESSARY TO RELEASE SAID ITEMS AND HEREBY INDEMNIFY YOU FOR ANY LOSS, INCLUDING ATTORNEYS FEES YOU MAY SUFFER BY REASON OF YOUR SO DOING.
 PARAGRAPHS TO SHOW ON POLICY _____
 HOLD POLICY PENDING FURTHER INSTRUCTIONS
 SEND OWNER'S POLICY TO: _____
 SEND LENDER'S POLICY TO: _____
 ONLY AFTER ASSIGNMENT OF DEED OF TRUST
ENDORSEMENTS REQUESTED: 100 116 8.1 102.4 OTHER _____

ADDITIONAL POLICY INSTRUCTIONS: _____

BY: _____ COMPANY: _____

SUPPLEMENTAL REPORT DO NOT WRITE BELOW-FOR IPT USE ONLY)

WE HAVE COMPLIED WITH YOUR INSTRUCTIONS POLICY TO FOLLOW
 POLICY HOLDING FOR FURTHER INSTRUCTIONS
IN ORDER TO ISSUE POLICY WE WILL REQUIRE _____

BY: _____ DATE: _____