

CHICAGO PIRT Service Center

Toll free PHONE: (855)599-9901

Customer Service email: PIRT@CTT.com

Toll free fax: (855)599-9902

PIRT® ORDER SHEET

DATE: ____/____/____ ACCT #: _____ ORDER#: _____

LENDER: _____ REF #: _____

ADDRESS: _____

ATTN: _____ PHONE: _____ FAX : _____

EMAIL ADDRESS: _____

INSURED: (if different from above) _____

- | | |
|--|--|
| \$100 <input type="checkbox"/> PIRT coverage up to \$200,000 | <input type="checkbox"/> FHLMC 704 APPRAISAL/PHOTOS W/ COMPARABLES PHOTOS |
| \$125 <input type="checkbox"/> PIRT Plus coverage up to \$250,000 | <input type="checkbox"/> FULL APPRAISAL - Phone #'s required |
| \$200 <input type="checkbox"/> PIRT Extra coverage up to \$360,000 | <input type="checkbox"/> FLOOD CERTIFICATE <input type="checkbox"/> Standard <input type="checkbox"/> Life of Loan |
| <input type="checkbox"/> ALTA | <input type="checkbox"/> SUB-ESCROW |

OWNERS NAME: _____

ADDRESS: _____

CITY: _____ ZIP CODE: _____

COUNTY: _____ APN #: _____

ARE THERE ANY EXISTING LIENS? _____

PHONE: HOME: _____ HIS WORK _____ HER WORK _____

SOCIAL SEC. NO.: (HIS) XXX -XX - _____ (HERS) XXX-XX- _____

ADDITIONAL APPRAISAL INFORMATION (for appraisal orders only)

- | | | |
|---|---|---|
| TYPE OF STRUCTURE: <input type="checkbox"/> Single family | <input type="checkbox"/> Triplex | Age of House _____ |
| <input type="checkbox"/> Duplex | <input type="checkbox"/> Condo | Total Rooms (excluding baths) _____ |
| INTERIOR: <input type="checkbox"/> Living Room | <input type="checkbox"/> Family Room | <input type="checkbox"/> Kitchen |
| <input type="checkbox"/> # Bedrooms | <input type="checkbox"/> # Bathrooms | <input type="checkbox"/> Den <input type="checkbox"/> Guest Home |
| FIXTURES: <input type="checkbox"/> Central A/C | <input type="checkbox"/> Pool | <input type="checkbox"/> Spa <input type="checkbox"/> Double Garage |
| <input type="checkbox"/> Fireplace | <input type="checkbox"/> Central Heating | <input type="checkbox"/> In Ground <input type="checkbox"/> Single Garage |
| <input type="checkbox"/> Wood Burning Stove | <input type="checkbox"/> Evaporative Cooler | <input type="checkbox"/> Above Ground <input type="checkbox"/> Carport |
| <input type="checkbox"/> Other _____ | <input type="checkbox"/> Deck | <input type="checkbox"/> Covered Patio <input type="checkbox"/> Window or Wall Heater |

ADDITIONAL INFORMATION: _____

APPROX. LIVING AREA: _____ APPROX. LOT SIZE: _____

PURCHASE PRICE: _____ OWNER ESTIMATE OF CURRENT VALUE: _____

COMMENTS: