

# Cardinal Title, LLC

1150 W. Main Street, P.O. Box 646  
Sun Prairie, WI 53590  
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**Property Address:** \_\_\_\_\_

**SELLERS:** \_\_\_\_\_ **BUYERS:** \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ City: \_\_\_\_\_

Phone: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Email: \_\_\_\_\_

Single \_\_\_\_\_ Married \_\_\_\_\_ Single \_\_\_\_\_ Married \_\_\_\_\_

Using POA: Yes / No Copy included: Yes / No Using POA: Yes / No Copy included: Yes / No

**ATTORNEY:** \_\_\_\_\_ **ATTORNEY:** \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ City: \_\_\_\_\_

Phone: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Email: \_\_\_\_\_

Drafting Deed & Transfer Return: Yes / No

**1<sup>st</sup> Mortgage:** \_\_\_\_\_ **LENDER:** \_\_\_\_\_

Loan #: \_\_\_\_\_

**2<sup>nd</sup> Mortgage:** \_\_\_\_\_

Loan #: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

**Prior Title Evidence: Abstract/ Title Ins.**

**Where:** \_\_\_\_\_

Loan Officer: \_\_\_\_\_

**Earnest Money \$:** \_\_\_\_\_

Who's Holding: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**Sale Price \$:** \_\_\_\_\_

Loan Amount \$: \_\_\_\_\_

**Closing Cost Credit \$:** \_\_\_\_\_

**Home Warranty: Buyer / Seller Cost \$** \_\_\_\_\_

**Closing Date & Time:** \_\_\_\_\_

Company: \_\_\_\_\_

**LISTING COMPANY:** \_\_\_\_\_  
Agent Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Commission: \_\_\_\_\_

**SELLING COMPANY:** \_\_\_\_\_  
Agent Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Commission: \_\_\_\_\_

**Property Questions:**

**Is there a Well on the property:** Yes / No

**LP Tank:** Yes / No If yes, how many gallons are left? \_\_\_\_\_ gals and Price per gallon at time filled \$ \_\_\_\_\_

**Fuel Oil Tank:** Yes / No If yes, how many gallons left? \_\_\_\_\_ gals and Price per gallon \$ \_\_\_\_\_

**Is this rental property:** Yes / No    **Are leases attached:** Yes / No    **Will this be rental property:** Yes / No

**Does it need a stipulation or waiver:** Yes / No

**Does property belong to a condo or homeowners association:** Yes / No

**If so name of association:** \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Notes: \_\_\_\_\_  
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Please feel free to contact us with any questions!! We look forward to working with you!