

NAME: _____ REQUEST DATE: _____	
PHONE: _____ EMAIL: _____ DATE NEEDED: _____	
I. DEED INFORMATION	
1. Preparer's Name and Address:	Name: _____ Address: _____ City: _____ State: _____ Zip: _____
2. Grantor's Name and Address:	Name: _____ Address: _____ City: _____ State: _____ Zip: _____ County: _____
3. Grantee's Name and Address:	Name: _____ Address: _____ City: _____ State: _____ Zip: _____ County: _____
4. Dates:	_____ Deed Date _____ Acknowledgement Date
5. Principal Amount:	_____
6. Full Description of Property:	_____ _____
7. Parcel ID Number:	_____
8. Property Information:	Name: _____ Address: _____ City: _____ State: _____ Zip: _____ County: _____
<input type="checkbox"/> Yes <input type="checkbox"/> No	Any existing encumbrances or liens? If yes, list below: _____ _____
<input type="checkbox"/> Yes <input type="checkbox"/> No	Any Reserve Rights? If yes, list what Property Rights the Grantor reserves: _____ _____
9. Witness Names:	1. _____ 2. _____