

ON-LINE ABSTRACT LTD.

1399 FRANKLIN AVENUE, SUITE 203

PHONE (516) 873-5350

FAX (516) 873-3948

No.	Date:	MTG. \$	FEES	
OWNER:		CHARGES:	MTG <u>AMOUNTS</u>	FEE <u>AMOUNTS</u>
		TITLE DEPTS. SURVEY COV. ABSTRACT		
PURCHASER:		EXTRA WORK OTHER OMV (optional) ALTA 9 ENDORSEMENTS		
INSURED MORTGAGE:		<u>DEPARTMENTALS</u>		<u>SURVEY COVERAGE</u>
		CERT. OF OCCUP.	<input type="checkbox"/>	HEREWITH/INSPECT <input type="checkbox"/>
PREMISES:		ST. REPORT	<input type="checkbox"/>	APP./SEND & INSP. <input type="checkbox"/>
		H & B	<input type="checkbox"/>	LOCATE/INSPECT <input type="checkbox"/>
COUNTY:		FIRE	<input type="checkbox"/>	REDATE (NY PROP) <input type="checkbox"/>
DISTRICT:		EMERGENCY REP.	<input type="checkbox"/>	USE EXISTING <input type="checkbox"/>
SECTION:		FUEL OIL	<input type="checkbox"/>	NONE REQUIRED <input type="checkbox"/>
BLOCK:		AIR RESOURCES	<input type="checkbox"/>	ORDER NEW <input type="checkbox"/>
LOT(S):		DEPT. OF HWYS.	<input type="checkbox"/>	SPECIAL REMARKS <input type="checkbox"/>
PROPERTY TYPE:		VAULT	<input type="checkbox"/>	
REMARKS:		UCC'S COUNTY	<input type="checkbox"/>	
		UCC'S ALBANY	<input type="checkbox"/>	
		SEWER (NASSAU & SUFFOLK)	<input type="checkbox"/>	
		DEPT. OF HEALTH	<input type="checkbox"/>	
		BANKRUPTCY SEARCH	<input type="checkbox"/>	
		OTHER	<input type="checkbox"/>	
REPORT DATE:		DISCOUNT:		DISCOUNT \$ M/F
CLOSING DATE:		PRIOR INSURER:		
SELLER'S ATTORNEY: Tel #		SPECIAL INSTRUCTIONS: IF THIS IS A REFINANCE WITHIN TEN YEARS YOU MAY BE ENTITLED TO A REDUCED PREMIUM. CONTACT THIS COMPANY IMMEDIATELY FOR THE DETAILS.		
BUYER'S ATTORNEY: Tel #		BANK ATTORNEY: Tel #		