



# TransCommunity Settlement Group, LLC

6915 Lost Colony Drive, New Kent, VA 23124

Email Order: [Manager@TransCommunity.us](mailto:Manager@TransCommunity.us) Call: (804) 777-9941 Fax: (888) 259-6495

Convenient – We come to you!

Caring – We care about your happiness!

Competitive – Flat Fee includes out of office & after hours at no charge

## ORDER FORM

Date: \_\_\_\_\_ Your Company: \_\_\_\_\_

Loan Officer Name, Phone, Email : \_\_\_\_\_

Processor Name, Phone, Email: \_\_\_\_\_

Company Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

PURCHASE \_\_\_\_\_ REFINANCE \_\_\_\_\_

If Purchase Realtor Name, Phone, Email: \_\_\_\_\_

Buyer/Borrower: \_\_\_\_\_ SS#: \_\_\_\_\_

Co-Borrower: \_\_\_\_\_ SS#: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

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

Sales Price: \_\_\_\_\_ Loan Amount: \_\_\_\_\_

Mortgagee Clause: \_\_\_\_\_

Anticipated Closing Date: \_\_\_\_\_

Please order the following ASAP:

\_\_\_\_\_ Title Commitment \_\_\_\_\_ Payoffs \_\_\_\_\_ Survey/Elev \_\_\_\_\_ Wiring Instructions

\_\_\_\_\_ Closing Protection Letter \_\_\_\_\_ Hazard Insurance \_\_\_\_\_ E&O

Attached hereto are the following documents:

\_\_\_\_\_ Contract \_\_\_\_\_ Survey \_\_\_\_\_ Owner's Policy

\_\_\_\_\_ Insurance \_\_\_\_\_ Approval \_\_\_\_\_ 1003 Other \_\_\_\_\_

Closing Location: \_\_\_\_\_ Our Office \_\_\_\_\_ Your Office \_\_\_\_\_ Customer Home