LANDTITLE

service beyond the expected

Recording Request

Date _____

Company _____
Contact _____
Contact Phone _____
Contact email _____

Regarding _____

LT File No. _____

Abstract / Torrens ID No. (circle one) _____

Misc. Recording _____ yes _____ no

County _____

PLEASE PERFORM THE FOLLOWING SERVICES

Record the following documents enclosed

_____ Quit Claim Deed from _____ to _____
_____ Warranty Deed from _____ to _____
_____ Mortgage Deed from _____ to _____
_____ Pay Mortgage tax of $ _____
_____ Pay Deed tax of $ _____
_____ Attested Copies Required
_____ Assignment of Mortgage and _____ copies
_____ Satisfaction
_____ Probate Papers
_____ Contract for Deed from _____ to _____
_____ Divorce Decree from _____
_____ CREV/Transfer Form
_____ Torrens Certificate No. _____
_____ Purchaser's Affidavit
_____ Affidavit- Record / Do Not Record (circle one)
_____ Well Certificate
_____ Other _____

Upon performing services please do the following

Issue Final Policy _____
Issue Endorsement _____
Continue Abstract _____

Pay Real Estate Taxes _____
Amount $ _____
Year _____

Pay Assessments _____
Levied $ _____
Pending $ _____

Check Enclosed $ _____

Billing address _____

Special Instructions:

2200 W. County Road C, Suite 2205, Roseville, MN 55113
651.638.1900 ◊ 651.638.1994 fax
info@landtitleinc.com
landtitleinc.com