

ORDERING PARTY CONTACT DETAILS	
Company/Firm Name:	File Reference:
Contact Name:	
Email Address:	
Phone No:	Fax No:

LOAN DETAILS	
Loan Number:	Estimated Settlement Date:
Loan Amount: \$	LVR:
Name and ABN/ACN of Mortgagee: (exactly as it will appear on the mortgage, plus Trust Name if applicable)	
Originator (if applic): (Company, Contact Name, Phone No)	
Full Name of Each Borrower: (include ACN/ABN and Trust Name if applic)	

PROPERTY DETAILS <i>(if more than one property please provide details on a separate sheet)</i>	
Address: (Street Address, Suburb, State, Postcode)	
Title Particulars: (Title reference(s) or General Law Book/No)	
Current Market Value: \$	
Property Type:	<input type="checkbox"/> Factory <input type="checkbox"/> Non-specialised commercial <input type="checkbox"/> Office <input type="checkbox"/> Professional Chambers <input type="checkbox"/> Residential/Commercial <input type="checkbox"/> Residential <input type="checkbox"/> Rural <input type="checkbox"/> Vacant Land <input type="checkbox"/> Warehouse <input type="checkbox"/> Other .....
Finance Type:	<input type="checkbox"/> Purchase <input type="checkbox"/> Refinance <input type="checkbox"/> Clear Title <input type="checkbox"/> Second Mortgage If refinance - name of outgoing mortgagee(s): .....
Mortgage Priority:	<input type="checkbox"/> First <input type="checkbox"/> Second   If second - name of first mortgagee: ..... - amount of first mortgagee's priority: \$ .....
Full Name of Each Mortgagor: (include ACN/ABN and Trust Name if applic)	

COVERAGE REQUIRED	
Tick as Appropriate:	<input type="checkbox"/> Survey <input type="checkbox"/> Building Certificate <input type="checkbox"/> Land Tax <input type="checkbox"/> Zoning <input type="checkbox"/> Other .....

GENERAL	Yes	N/A
An up-to-date title search for each property is attached	<input type="checkbox"/>	
A valuation report for each property is attached	<input type="checkbox"/>	
If any property is "clear title" the identity of each borrower and mortgagor has been verified in accordance with the prescribed 100 point identity verification procedure	<input type="checkbox"/>	<input type="checkbox"/>
If any property is "clear title" and the borrower will not be receiving the benefit of the loan funds, details of why the borrower is not receiving the benefit are attached	<input type="checkbox"/>	<input type="checkbox"/>
If any property is being purchased, a copy of the front page of the Contract for Sale is attached	<input type="checkbox"/>	<input type="checkbox"/>
A staff member of the ordering party / funder / panel lawyer has a personal interest in the transaction and details are attached	<input type="checkbox"/>	<input type="checkbox"/>
A title defect has been identified and details are attached	<input type="checkbox"/>	<input type="checkbox"/>

I declare that the information contained in this form is accurate, to the best of my knowledge.		
Print Name	Signature	Date

Please complete before settlement and send with attachments by fax to (02) 9299-8445, or by email to [mlp@firsttitle.com.au](mailto:mlp@firsttitle.com.au) or call *First Title's* Underwriting Team on (02) 8235-4433