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RESEARCH ORDER FORM

REQUESTED BY:

FILE/REFERENCE NO. _____

DATE: _____

DATE NEEDED: _____

PHONE: _____ FAX: _____

ATTN: _____

EMAIL ADDRESS:

RESEARCH REQUESTED:

| | |
|---------------------------|------------------------|
| _____ ABSTRACT | _____ DOCUMENT COPIES |
| _____ 2 LINK OR 20 YEAR | _____ CERTIFIED COPIES |
| _____ ACQUISITION FORWARD | _____ COPIES OF TITLES |
| _____ UPDATE | |

REQUESTED CERTIFICATES:

_____ CONVEYANCE/MORTGAGE

_____ UCC _____ L & P

_____ STATE TAX SEARCH (FOUR YEAR RESEARCH)

_____ CITY TAX RESEARCH

PRESENT OWNERS:

| | |
|-------|------------------|
| _____ | ACQ. DATE: _____ |
| | COB/FOLIO: _____ |
| _____ | ACQ. DATE: _____ |
| | COB/FOLIO: _____ |

PROPERTY DESCRIPTION:

SUBDIVISION: _____

SECTION/PHASE/PARCEL: _____ SQUARE: _____ LOT: _____

MUNICIPAL ADDRESS: _____

PARISH: _____

NAMES TO ACQUIRE: _____