

**PERSONAL INFORMATION SHEET
ATTORNEY**

Date: ____/____/____

Authorized Signatory

Escrow Signer

NOTE: A personal information sheet must be completed for each of the attorneys who search and examine titles, review documents, conduct closings and/or are involved with title insurance policies.

Supplement to Agency Application for: _____

1. Attorney Name: _____
2. Social Security # _____ 3. Date of Birth _____
4. Title/Position _____ 5. Home Phone (____) _____
6. State(s) in which you are admitted to practice _____ in ____ . License # _____
 Law School attended _____ Graduation Date _____
 Undergraduate School attended _____ Graduation Date _____
7. Other state Licenses and admission dates _____
8. Is your practice primarily civil or criminal? _____
9. How many years experience in real property? _____
10. What percent of your practice is devoted to Real Estate matters? _____
11. Estimated number of titles fully examined in the last 3 years. Residential _____ Commercial _____
12. Beginning with your current address, list home addresses for the last 10 years and dates lived there.

FROM	TO	ADDRESS
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_____	_____	_____
_____	_____	_____
_____	_____	_____

13. Beginning with your current employment, list employment history for the past 10 years. Include position, employer's address, telephone and contact person. A resume may be attached-be sure current employment is listed.

FROM	TO	COMPANY/POSITION/ADDRESS/TELEPHONE/CONTACT PERSON
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_____	_____	_____
_____	_____	(____) _____
_____	_____	(____) _____
_____	_____	(____) _____

14. Have you ever declared bankruptcy?

No

Yes, If yes, Voluntarily Involuntarily

Filed in which U.S. District Court? _____

When? _____

15. Are you currently or have you ever been a plaintiff or defendant in any legal action?

No

Yes

If yes, in what jurisdiction? _____

Case # : _____

Type of action: _____

16. Are there any outstanding judgments or liens against you?

No

Yes

If yes, where recorded? _____

Amount \$: _____

Explanation: _____

17. Have you ever been convicted of a felony?

No

Yes, If yes, when? _____

Where? (CITY/STATE) _____

Convicted of? _____

18. Have you ever been denied a bond or business insurance?

No

Yes, If yes, when? _____

Where? (CITY/STATE) _____

By what bonding agency? _____

Reason denied: _____

19. Have you ever received a reprimand by any state bar association?

No

Yes, If yes, which state? _____

Date of reprimand: _____

This will advise you that in connection with your firm's or company's potential appointment as our agent, we will be seeking information relative to your business and professional reputation in your community which may include matters in the nature of investigative consumer reports as defined in the Federal Fair Credit Reporting Act. This notice is given to you in compliance with that Act. The information contained herein may be verified by the Company, but is furnished on a strictly confidential basis by the applicant to aid the Company in its investigation. By signing hereunder, you certify that the information provided hereinabove is correct.

Date: _____ Signature: _____

Chicago Title Insurance Company
**Addendum to Application for Agency
and/or Personal Information Sheet - Attorney**

Name:

Agency Name:

Law Firm Name:

E-mail:

Driver's License No.: _____ State:

Current Law Practice

Number of years I have actively practiced law:

Percentage of my time spend practicing law:

In my Real Estate and Title Law Practice, I regularly do the following:

- Draw Deeds and Mortgages
- Examine Real Estate Title from the Public Records
- Examine Abstracts of Title
- Close Real Estate Transactions

My status as an Approved Attorney has/has never (circle one) been canceled by a Title Insurer.
(Provide details of any cancellation.)

Other Employment/Ownership Interests

In addition to practicing law, I have an ownership interest in, or am employed by:

- () Abstracting Company:
[] ownership [] employed

- () Title Insurance Agency:
[] ownership [] employed

Clients

(a) I do/do not (circle one) have any clients that are real estate developers, brokers, mortgage bankers, or that are affiliated with any of these types of companies. If yes, such clients include:

(a) I regularly examine title or close real estate transactions for the following clients (or others):

Name	Address	Phone No.
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The Company may/may not (circle one) contact these clients for references.

References

The Company may contact the following persons for references:

Name	Address	Phone No.
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Signature:

RESPONSIBILITIES AND OBLIGATIONS OF AN APPROVED ATTORNEY
OF ANY ONE OF THE FOLLOWING COMPANIES
Chicago Title Insurance Co. □ Security Union Title Insurance Co.
HEREINAFTER REFERRED TO AS THE COMPANY

In recognition and consideration of the mutual benefits to me and the Company, and the obligations which the Company will assume in reliance upon my professional service, I hereby agree that if I am appointed as an Approved Attorney, the following conditions and stipulations shall apply:

1. Attorney-Client Relationship

My relationship with the Company shall be that of attorney and client in all matters of transactions in which I render my attorney's opinion or advice, or provide other professional services directly to or for the benefit of the Company in the operation of its business of insuring real estate titles and closing real estate transactions, regardless of whether the request for such services was made directly by the Company or by some other person or party.

2. Approved Attorney - Definition and Scope

I understand that my designation as an Approved Attorney of the Company indicates that I have met or exceeded the standards of the Company for integrity, diligence and professional competence. As an Approved Attorney, my opinions of title are acceptable to the Company as a basis for the issuance of its title insurance policies. In addition, within the limits set forth in paragraph 8, my services as a closing attorney for real estate transactions are acceptable to the Company when a title insurance policy of the Company is to be issued.

3. Conflict of Interest

I will promptly notify the Company in writing of any conflict of interest which arises out of my obligations to the Company and other clients, and will not continue, thereafter, to represent or act on behalf of the Company as to such matters without prior written approval of the Company.

4. Compensation

The Company shall not be responsible to me for the payment or collection of my fees, expenses or other charges unless the same are specifically authorized and agreed upon by the Company.

5. Separate Accounts

I will keep safely in accounts separate from my (or my firm's) personal or operating accounts, all funds received by me from any source in connection with transactions in which the Company's title insurance is involved, including funds for indemnity deposits and customer funds for escrow or closing and to disburse said funds only for which the same were deposited with me (or my firm), and reconcile all such accounts not less than monthly.

6. Transaction Files

I will prepare, maintain and preserve a file related to the liabilities of the Company for each title opinion and settlement or escrow service as an Approved Attorney for the Company. Such file shall include all supporting documents and information necessary for the services rendered, including, but not limited to title searches, surveys, affidavits, settlement or escrow instructions, lien pay-off or assumption statements and settlement statements.

7. Examination of Records

I agree that at any reasonable time or times the Company may examine my files, books and accounts and other records related to liabilities of the Company and professional services provided by me as an Approved Attorney for the Company. Such right of examination may continue to be exercised after termination of my status as an Approved Attorney in the event of a claim. I also agree that the Company may make inquiries into my personal and employment history, as well as any matters related thereto. I authorize employers, schools, firms or persons to release information in response to such pre- and/or post-association inquiries and I hereby release same from all liability in responding to such inquiries.

8. Limitation of Authority

I agree that I shall not, without approval of the Company:

- A. Provide settlement services in connection with real estate transactions in excess of \$500,000.00.
- B. Accept settlement instructions which will expose the Company to a risk which the Company has by rules determined to be an extraordinary or extra-hazardous risk.
- C. Close a real estate transaction which I know to be based upon a disputed title or a dispute between the parties to a settlement or escrow.
- D. Adjust any claim for loss for which the Company may become liable.
- E. Accept service of process on the Company.
- F. Incur bills or debts chargeable to the Company.

- G. Provide services for the periodic disbursement of equity or construction loan funds for the payment of construction costs.
- H. Alter any forms furnished by the Company.

9. Maintenance of Lawyer's Liability Policy and Fidelity Bond

I agree that I shall maintain my Lawyer's Liability Policy and Fidelity Bond at the present or higher level of coverage as set forth in my application so long as I am an Approved Attorney for the Company and will notify the Company in the event such insurance is canceled or I no longer maintain it. I agree to maintain my Lawyer's Liability Policy at a level of coverage not less than the amount in Paragraph 8A, hereof, as now shown or as later amended.

My liability to the Company for any loss, cost or damage which the Company may sustain arising out of the performance of my professional services, shall be based upon the standards of professional conduct and service of attorneys in my community without regard to whether or not my Lawyer's Liability Policy or Fidelity Bond provides such coverage.

In addition, I agree to indemnify the Company against any and all loss, cost or damage which the Company may sustain on account of the following acts or failure to act on my part or any employee of mine:

(a) fraud, (b) gross negligence, (c) wilful disregard of the Company's rules and instructions, and (d) loss or misapplication of customer's funds entrusted to me.

10. Duties of the Company

The Company shall:

- A. Furnish guidance in providing professional services as an Approved Attorney.
- B. Determine promptly all risk assumption questions submitted by me.

11. Claims

If a claim is made to me, if I receive notice of a potential claim or if I receive notice of litigation which may result in a claim arising out of professional services provided by me for you, I agree to give prompt written notice to the Company within 3 business days from the date I receive the claims, potential claims or notice of claim or litigation and shall lend all reasonable assistance, without charge to the Company, in investigating or contesting such claims.

12. Termination

My status as an Approved Attorney may be terminated by either if us upon written notice, but such termination shall not affect any obligation or liability incurred by me as your Approved Attorney. Notice to me may be given at the address on my application or the latest address supplied by me to you. I further understand that if I should be considered as an Approved Attorney, any false, misleading, or omitted information in my application, resume or on this form, may disqualify me from approval. Also, in the event of approval, I understand that false, misleading, or omitted information in my application, resume or on this form may result in the immediate termination of said approval.

13. Other Agreements Void

I understand and agree that this Agreement sets forth all the promises, agreements, conditions and understandings between me and the Company and that there are no promises, agreements, conditions or understandings, either oral or written, between us other than as are herein set forth.

14. Nonwaiver of Rights

The failure of the Company to enforce strictly the performance by the Approved Attorney of any provision of this Agreement or to exercise any rights or remedy following from the Approved Attorney's breach of any condition or the acceptance by the Company of any payments, remittance or other performance during the Approved Attorney's failure to perform or during the Approved Attorney's breach shall not be a waiver by the Company of its rights under this Agreement and shall not be construed to be an amendment or modification of this Agreement.

15. Renewal of Contract

I understand that the terms of this Agreement will expire on the third anniversary of the execution date stated below and at that time the Company shall review my compliance with this Agreement before renewing my status as an Approved Attorney. This Agreement shall automatically renew at each expiration date unless either party give written notice of his election not to extend this Agreement at least 90 days prior to the end of said original term or any additional term.

DATED THIS _____ DAY OF _____, 20_____.

Signature