Statement of Information (Confidential)

This form is needed in order to eliminate judgments and liens against people with similar names The street address of the property in this transaction is: (if none, leave blank) Address City ☐ Owner ☐ Tenants ☐ Lessee ☐ Single Residence ☐ Multiple Residence ☐ Commercial ☐ Vacant Land Occupied by: ☐ Yes ☐ No ☐ Yes ☐ No Any construction/improvements in last 6 months? Is any portion of new loan to be used for improvements? If yes, state nature of work done or contemplated Party 1 Party 2 First Middle Last First Middle Last Former last name(s), if any Former last name(s), if any Birthplace Birth Date Birthplace Birth Date Social Security No. Driver's License No. Social Security No. Driver's License No. I ☐ am single ☐ am married ☐ Have a domestic partner I ☐ am single ☐ am married ☐ Have a domestic partner Name of current spouse or domestic partner (if other than Party 2) Name of current spouse or domestic partner (if other than Party 1) Name of <u>former</u> spouse/domestic partner (if none, write "none") Name of former spouse/domestic partner (if none, write "none") Marriage or Domestic Partnership Between Parties 1 and 2 Are Parties 1 & 2: Married? Domestic Partners? Date of Marriage/Domestic Partnership:__ Party 1 - Occupations for Last 10 Years Present Occupation Firm Name Address No. of Years **Prior Occupation** Firm Name Address No. of Years Party 1 - Residences for Last 10 Years From To Number and Street City and State Party 2 - Occupations for Last 10 Years Present Occupation Firm Name Address No. of Years Prior Occupation Firm Name Address No. of Years Party 2 - Residences for Last 10 Years From To Number and Street City and State Have any of the above parties owned or operated a business? ☐ Yes ☐ No If so, please list names I have never been adjudged, bankrupt nor are there any unsatisfied judgments or other matters pending against me which might affect my title to this property, except as follows: The undersigned declare under penalty of perjury that the above information is true and correct. (all parties must sign) Date Signature Signature Home Phone Home Phone Work Phone Work Phone Fmail Address Fmail Address