

# Order Form

**Please submit this form to [CSSC@fnf.com](mailto:CSSC@fnf.com) or fax to: 303-648-6811, we will review and send you our short sale documents package and any lender-specific documents that will be required to process your short sale transaction. Please let us know if you have any questions, thank you!!**

Property Address: \_\_\_\_\_

County: \_\_\_\_\_

Listing Agent: \_\_\_\_\_

Company Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Title Company: \_\_\_\_\_

Sales Rep: \_\_\_\_\_

Seller #1: \_\_\_\_\_

Seller #2: \_\_\_\_\_

SS#: \_\_\_\_\_

SS#: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Phone: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

Mailing address if different from property: \_\_\_\_\_

1st Mtg Lender: \_\_\_\_\_

Loan # \_\_\_\_\_

Outstanding Balance: \_\_\_\_\_

Current:  Yes  No Last Pmt Date: \_\_\_\_\_

Loan Type:  FHA  VA  Conventional

2nd Mtg Lender: \_\_\_\_\_

Loan # \_\_\_\_\_

Outstanding Balance: \_\_\_\_\_

Current:  Yes  No Last Pmt Date: \_\_\_\_\_

Other Liens (HOA, Tax Liens, Judgments): \_\_\_\_\_

Do you have private mortgage insurance? (PMI) \_\_\_\_\_

Is borrower or spouse active duty military in last 12 months?  Yes  No Who? \_\_\_\_\_

Have you filed bankruptcy?  Yes  No If yes, when discharged? \_\_\_\_\_

Have you attempted to modify loans?  Yes  No

Has your lender filed foreclosure yet?  Yes  No If so, foreclosure sale date: \_\_\_\_\_

Are taxes and insurance included in mortgage payment?  Yes  No If not, are they current?  Yes  No

Property Type:  Single Family  Condo  Townhome

Is there an HOA?  Yes  No If yes, please list contact info: \_\_\_\_\_

Are dues current?  Yes  No If not, outstanding balance: \_\_\_\_\_

Water/Sewer/Storm/Waste Company Name & Contact Info: \_\_\_\_\_

Are you current?  Yes  No If not, outstanding balance: \_\_\_\_\_

Have you scheduled your legal consultation?  Yes  No If yes, when? \_\_\_\_\_

If so, have you engaged legal counsel?  Yes  No If so, who? \_\_\_\_\_

Is your property:  Primary residence  Investment  Second Home

Is your property:  Owner Occupied  Tenant Occupied  Vacant

Tracy Richter, Supervisor - Direct 303-291-9971

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