



INVESTORS TITLE INSURANCE COMPANY

South Carolina State Office

Post Office Box 642

Columbia, South Carolina 29202-0642

Telephone 803/799-8650

® Inward WATS (S.C. Only) 800-922-8452

Agent/Agency:

ATTORNEY'S FINAL CERTIFICATE FOR OWNER'S AND/OR MORTGAGEE POLICY

(To be furnished only when Interim Title Insurance Binder has not been issued. If Binder has been issued furnish Attorney's Final Certificate made a part of Binder.)

The undersigned hereby certifies to INVESTORS TITLE INSURANCE COMPANY that it is his/her opinion that, subject only to the mortgage, if any, set forth below and the liens, encumbrances, and other objections noted under Schedule B hereof, the marketable fee simple title to said real estate is, as of the date of this report, vested as stated below. This certification to Investors Title Insurance Company by the undersigned is based upon a personal examination of all public records affecting the title to real estate described in the ATTACHED MORTGAGE. Said personal examination covers a period of not less than sixty (60) years last past unless indicated otherwise below.

(Note — If title is not marketable, communicate by letter facts and law to the Company for ruling)

Schedule A

Fill in this section for owner's or leasehold insurance

1. TITLE VESTED IN: _____
2. Nature of instrument _____ Amount of owner's coverage: _____
(not to exceed fair market value)
3. Grantor(s) _____
4. Grantee(s) _____
5. Dated _____ 20 _____ recorded in _____ County, S.C., on _____ 20 _____
at _____ o'clock _____ M., recorded in Book _____ Page _____
6. Estate or interest of Grantee(s) under this instrument is _____ (Fee Simple — Life Estate — Leasehold)
and, so far as known to the undersigned, said instrument was not given in contravention of the bankruptcy act.
7. Is this a one-to-four family residence? _____

Fill in this section for mortgagee insurance

8. Mortgagors or Grantors _____
9. Nature of instrument: Mortgage/Deed of Trust. 10. Trustee _____
11. Mortgagee or Beneficiary _____
12. Dated _____ 20 _____ recorded in _____ County, S.C., on _____ 20 _____
at _____ o'clock _____ M., recorded in Book _____ Page _____
13. Principal amount of debt secured \$ _____ Variable Loan Coverage \$ _____
14. ALTA ENDORSEMENT REQUIRED _____
15. Issue Mortgagee's Certificate of Title Insurance pursuant to Master Mortgagee Policy No. _____

ATTACH COPY OF DESCRIPTION

Schedule B

REISSUE OF POLICY NO. _____

1. TAXES AND SPECIAL ASSESSMENTS:

- (a) Taxes have been paid through and including those for the year 20 _____.
- (b) Special levies or assessments now due or payable in future installments; _____

2. MORTGAGES, DEEDS OF TRUST, AND VENDOR'S LIENS — omit security instrument to be insured. Please furnish evidence of mortgage payoff if issuing Mortgagee Certificate.

3. ARE THERE ANY RESTRICTIVE COVENANTS AND CONDITIONS? _____ (If YES, Complete Below)

- (a) Recorded in Book _____ Page _____ Registry of _____ County, with a front setback requirement of _____ feet and a side setback requirement of _____ feet.
- (b) Are they violated? _____
- (c) Do restrictions contain reversionary or forfeiture clause? _____
- (d) Is an easement reserved? _____ If general, so state; if specific, state what areas affected _____

4. DOES RECORDED PLAT OF SUBDIVISION SHOW BUILDING SET-BACK LINE? If so, give details: _____

5. DOES LAND ABUT A PUBLICLY DEDICATED RIGHT OF WAY OR HAVE ACCESS THERETO OVER A VALID RECORDED EASEMENT? _____ (List matters affecting title to land over which valid recorded easement is located)

6. ARE THERE OTHER LIENS, OBJECTIONS, DEFECTS AND EASEMENTS? _____ (Answer "yes" or "no" and, if any, describe below.)

7. Is a mobile or manufactured home located on the property? _____ If yes, do any liens appear on the mobile home title? _____

8. (a) Property is occupied by Owner _____ Tenant _____ Please provide pertinent lease information, if applicable.

- (b) Statutory lien period has expired ☐ or has not expired ☐ or unknown ☐

(If lien period has not expired or is unknown, please attach executed Affidavit Regarding Liens.)

- (c) Is insurance as to matters of survey required? _____ (If so, attach current plat of survey.)

- (d) The Loan is FHA _____ VA _____ Conventional _____ (Permanent Construction _____ Temporary Construction _____)

9. IF PROPERTY DESCRIBED ABOVE IS A CONDOMINIUM UNIT, DO YOU CERTIFY THAT ALL DOCUMENTS REFERRED TO IN YOUR STATE'S CONDOMINIUM STATUTE COMPLY WITH REQUIREMENTS OF THAT STATUTE? _____

The undersigned further certifies: (a) That, so far as known to the undersigned, there is no dispute among attorneys of the local bar as to the validity of the title to the real estate covered by this report, and (b) that the title is in no way dependent upon the validity of a sale of the property for delinquent taxes or assessments.

*This title is certified from _____ at _____ M.
to _____ at _____ M.

Send Mortgagee policy to () Attorney () Lender
Send Owner's policy to () Attorney () Insured () Lender
(Give Address)

Approved Attorneys

Member of Firm

Address of Lender

Address

Lender Loan No.

Property Address

City

Zip

Address of Owner

Telephone

*This date should be the date you last examined the records for all matters affecting the estate or interest to be insured. Do not date your certificate as of a date subsequent to such examination since same will be construed to set forth all matters affecting the estate or interest to be insured AS OF ITS DATE and title policy issued accordingly.

FORM NO. SC-302