



Investors Title Insurance Company

South Carolina State Office
Post Office Box 642
Columbia, South Carolina 29202-0642
Telephone 803/799-8650
WATS 800-732-8005

ATTORNEY'S PRELIMINARY REPORT ON TITLE

(To be submitted prior to closing when a binder is desired for closing)

SCHEDULE A

Marketable Fee Simple Title is vested in _____

Said property is to be sold to _____ for \$ _____
and/or mortgaged to _____

as security for a FHA _____ VA _____ Conventional _____ (Permanent Construction _____ Temporary Construction _____)

Loan of \$ _____ If owner's policy desired, in what amount: \$ _____

Variable Loan Coverage _____ ALTA ENDORSEMENT REQUIRED _____

Enter previous policy number if insured last 10 years _____

ATTACH COPY OF DESCRIPTION OR COPY OF DEED OR MORTGAGE

SCHEDULE B

1. TAXES AND SPECIAL ASSESSMENTS:

- (a) Taxes have been paid through and including those for the year _____.
- (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 but show all others including those executed by owner insured. (Give complete data: Including if to be released, cancelled, subordinated or remain of record)

Answer Each Item

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, a side setback requirement of _____ feet, a side street setback requirement of _____ feet, a rear setback requirement of _____ feet.
- (b) Are the restrictions violated? _____ If yes, please explain.
- (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 ROAD RIGHT OF WAY _____, **IF NOT, DOES IT HAVE ACCESS THROUGH A VALID RECORDED EASEMENT?** _____

6. ARE THERE OTHER LIENS, OBJECTIONS, AND DEFECTS AND EASEMENTS?_____(Answer "yes" or "no" and, if yes, 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)** Is this a one-to-four family residence? _____

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

ATTORNEY'S CERTIFICATION

Based on a personal examination of all public records affecting the title to the real estate referred to in Schedule A hereof, which records cover a period of not less than sixty (60) years last past, the approved attorney certifies to Investors Title Insurance Company that in his opinion this Report on Title correctly reflects the status of the title to said real estate. Certification is hereby made that so far as known 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 that the title is in no way dependent upon the sale of the property for delinquent taxes or assessments. Title is certified as of _____ at _____ M.

Send Original Binder To () Attorney () Lender

APPROVED ATTORNEYS

LENDER'S ADDRESS _____ BY _____

MEMBER OF FIRM

ADDRESS _____

TELEPHONE _____

CITY _____ ZIP _____

TELEPHONE _____