



REO APPLICATION FORM

Surety Foreclosure Division
Surety Representative:

Gina Ozhuthual
C: (609) 408-5577
O: (800) 908-4853 Ext. 1280
gozhuthual@mysurety.com
mysurety.com/ginaozhuthual

Today's Date: _____ Desired Closing Date: _____
Property Address: _____
City: _____ State: _____ Municipality: _____ County: _____
Sales Price: \$ _____ Mortgage Amount: \$ _____
Block: _____ Lot: _____ Deed Book: _____ Page: _____
Current Owner/Seller of Record: _____

BUYER INFORMATION

BUYER 1:

Name: _____
SS#: _____
Email: _____

BUYER 2:

Name: _____
SS#: _____ Phone: _____
Email: _____

SELLING BROKER:

Company: _____
Real Estate Agent: _____
Email: _____ Phone: _____

BUYER ATTORNEY:

Company: _____
Attorney Name: _____
Email: _____ Phone: _____

MORTGAGEE/LENDER:

Company: _____
Address: _____
Loan Officer Name: _____
Email: _____ Phone: _____
Processor Name: _____
Email: _____ Phone: _____

MORTGAGE BROKER (if applicable):

Company: _____
Address: _____
Loan Officer Name: _____
Email: _____ Phone: _____
Processor Name: _____
Email: _____ Phone: _____

SELLER CONTACT INFORMATION

SELLER: Company: _____ Contact Person: _____
Address: _____ Email: _____
Phone: _____
Foreclosed Owner if Applicable: _____

LISTING BROKER:

Company: _____
Real Estate Agent: _____
Email: _____ Phone: _____

SELLER ATTORNEY:

Company: _____
Attorney Name: _____
Email: _____ Phone: _____

ORDER AUTHORIZED BY

Company: _____ Contact: _____
Phone: _____ Email: _____ Client Case/Reference#: _____

I/WE HEREBY AUTHORIZE YOU TO ORDER THE FOLLOWING (Please Check):

- Title Insurance (Post Sale Policy) Purchase (Attach Contract)
- REO Purchase (Attach Contract) Financing/HELOC: Amount: \$ _____ Loan #: _____

SPECIAL INSTRUCTIONS/ COMMENTS:

