



# Pelican Escrow Services, LLC

Your Escrow Agent Administrator

*Serving Bond for Deed and Private Mortgages*

We Connect People.

## Information for Account Set Up

Dear Title Company,

Thank you for using Pelican Escrow Services, LLC. Please complete this form and return to us. As you prepare the Bond for Deed Contract for your Closing Documents, at your earliest convenience please send us a draft for our approval. In order to meet your client's expectations, we feel it necessary to see what services are being asked of us. We reserve the right to view and accept the Contract before the Closing date. Once we review the Contract, we will email you any changes we feel necessary to accept this account for servicing.

Our Account Set Up fee is \$375, which shall be collected at the Closing and sent to Pelican Escrow with the final documents. If you need assistance, please contact our office at: 985-626-5995.

.....  
Today's Date: \_\_\_\_\_

Your Reference File #: \_\_\_\_\_ Projected Closing Date: \_\_\_\_\_ Time: \_\_\_\_\_ am/pm.

### Closing Title Company Information

Title Co. Name: \_\_\_\_\_

Title Co. Address: \_\_\_\_\_

Title Co. City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Title Co. Contact Person: \_\_\_\_\_ Email: \_\_\_\_\_

Title Co. Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

Name of Closing Attorney/Notary to be printed on Documents: \_\_\_\_\_

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Type of Contract: (Check one)     Bond for Deed     Installment Option

### Property Description:

Parish: \_\_\_\_\_ Subdivision: \_\_\_\_\_

Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Square: \_\_\_\_\_ District: \_\_\_\_\_

(New Orleans only)

Other Legal Description: \_\_\_\_\_

Municipal Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Is the Property being sold and purchased "As Is" Condition? (Check One)     Yes     No

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### Seller #1:

Name: \_\_\_\_\_ Soc. Sec #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (    ) \_\_\_\_\_ Email: \_\_\_\_\_ Married Status: \_\_\_\_\_

### Seller #2: (Spouse, Partner, Other)

Name: \_\_\_\_\_ Soc. Sec #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (    ) \_\_\_\_\_ Email: \_\_\_\_\_ Married Status: \_\_\_\_\_

.....

### Purchaser #1:

Name: \_\_\_\_\_ Soc. Sec #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (    ) \_\_\_\_\_ Email: \_\_\_\_\_ Married Status: \_\_\_\_\_

### Purchaser #2: (Spouse, Partner, Other)

Name: \_\_\_\_\_ Soc. Sec #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (    ) \_\_\_\_\_ Email: \_\_\_\_\_ Married Status: \_\_\_\_\_

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<b>Purchase Price</b>	\$	.
<b>Down Payment</b>	\$	.
<b>Amount Financed</b>	\$	.
<b>Interest Rate (APR)</b>	\$	.
<b>Monthly P &amp; I Payment</b>	\$	.
<b>Monthly T &amp; I Payment</b>	\$	.
<b>First Payment Due Date*</b>		
<b>Final Payment Due Date</b>		

**\*NOTE:** To allow adequate processing time, the **Due Date** for the Buyer's Bond for Deed payment sent to Pelican Escrow Services, LLC. **MUST** be 15 days or more BEFORE the Due Date of the Seller's Mortgage payment.

**Additional Payment Provisions:** \_\_\_\_\_

\_\_\_\_\_

**Pelican Escrow Services, LLC**  
We Connect People.  
**Information for Document Preparation**

**Existing Liens (s):**     **Yes**    **No**        Assume None unless listed below

There is a Mortgage/Lien recorded under instrument # (MOB) \_\_\_\_\_

Date of Mortgage: \_\_\_\_\_

Original Mortgage Amount: \$ \_\_\_\_\_      Current Principal Balance: \$ \_\_\_\_\_

Interest Rate: \_\_\_\_\_ %      Fixed Rate:    **Yes**    **No**        Assume Fixed unless stated otherwise

**Mortgage Company:** \_\_\_\_\_      Loan #: \_\_\_\_\_

Mortgage Mailing Address for Payments: \_\_\_\_\_  
\_\_\_\_\_

Phone: (    ) \_\_\_\_\_      Fax: (    ) \_\_\_\_\_

**Monthly Principal and Interest Payment:**      \$ \_\_\_\_\_ (P & I)

**Monthly Tax and Insurance Payments:**      \$ \_\_\_\_\_ (T & I)

**Total Monthly Mortgage Payment:**      \$ \_\_\_\_\_ (Total)

The Next Payment is Due on: \_\_\_\_\_, 20\_\_\_\_\_

Final Payment Date on Mortgage: \_\_\_\_\_, 20\_\_\_\_\_

**If any Other Liens:**    **Yes**    **No**    If so, please provide the same information as above on a separate sheet.

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**Insurance Company:**

Hazard Policy #: \_\_\_\_\_      Renewal Date: \_\_\_\_\_      Premium: \$ \_\_\_\_\_

Flood Policy #: \_\_\_\_\_      Renewal Date: \_\_\_\_\_      Premium: \$ \_\_\_\_\_

Agent's Name: \_\_\_\_\_

Phone: (    ) \_\_\_\_\_      Fax: (    ) \_\_\_\_\_

**Special Instructions:** \_\_\_\_\_  
\_\_\_\_\_