

STATE OF ILLINOIS
DEPARTMENT OF FINANCIAL AND
PROFESSIONAL REGULATION
DIVISION OF FINANCIAL INSTITUTIONS

APPLICATION FOR REGISTRATION OF A TITLE AGENT

All information must be LEGIBLE.
Incomplete applications will be returned

1. TYPE OF ENTITY:

CORPORATION PARTNERSHIP INDIVIDUAL/SOLE PROPRIETOR
LIMITED LIABILITY COMPANY ASSOCIATION OTHER

2 -7:

DATE OF BIRTH (MM/DD/YYYY): _____

(Individuals only)

SOCIAL SECURITY NUMBER/FEDERAL EMPLOYER IDENTIFICATION NUMBER:

8. NAME OF AGENT _____

9. ADDRESS OF AGENT: _____

10. _____

11. CITY _____

12. STATE _____

13. ZIP CODE _____

14. PHONE NUMBER _____

15. E-MAIL ADDRESS: _____

16. NAME AND TITLE OF CONTACT PERSON: _____

17. Has Agent or any of its officers, directors, members, partners or shareholders (other than Public Corporations) ever been the subject of disciplinary action

- by this Department in title insurance or any other industry or profession that it regulates,
- or by another state or jurisdiction that regulates title insurance?

18. Agent Statement *(to be completed by agent and submitted to underwriter who is to then upload during the online registration process)*

19. Affidavit *(to be completed by agent and submitted to underwriter who is to then upload during the online registration process).*

State of _____

County of _____

AFFIDAVIT
(Individual)

I, _____, being duly sworn on oath, state that I have personal knowledge of the facts contained herein, that the answers are true and correct to the best of my knowledge and belief and, if called as a witness, that I would testify as follows:

1. I am 18 years of age or older.
2. I am seeking registration as a title agent.
3. I have never been convicted or pled guilty to any felony or misdemeanor involving a crime of theft or dishonesty or any such conviction or plea of guilty has been fully disclosed to the Department.

Signature

Date

Subscribed and sworn to before me this _____ day

of _____ 20 _____

Notary Public

My commission expires _____

State of _____

County of _____

AFFIDAVIT

(Corporation, Partnership, Limited Liability Company, Association)

I, _____, being duly sworn on oath, state that I have personal knowledge of the facts contained herein, that the answers are true and correct to the best of my knowledge and belief and, if called as a witness, that I would testify as follows:

1. I am an owner, officer, director, principal, member or manager of the business entity seeking registration as a title insurance agent.
2. No owner, officer, director, principal, member, or manager of the business entity has ever been convicted or pled guilty to any felony or misdemeanor involving a crime of theft or dishonesty or any such conviction or plea of guilty has been fully disclosed to the Department.

Signature

Date

Subscribed and sworn to before me this _____ day

of _____ 20_____

Notary Public

My commission expires _____

NAME OF AGENT _____

STATEMENT BY AGENT

PURSUANT to the Illinois Administrative Procedures Act [5 ILCS 100/10-65(c)]. Applications for registration shall include applicant's social security number and the applicant shall certify under penalty of perjury, that he or she is not more than 30 days delinquent in complying with a child support order. **Failure to certify shall result in disciplinary action, and making a false statement may subject the applicant to contempt of court.** (NOTE 1)

Is the agent more than 30 days delinquent in complying with a child support order? Yes ___ No ___

PLEASE provide the date that the Agent signed the agency agreement with the title insurance company.

Date: _____

PURSUANT to Section 18 of the Title Insurance Act [215 ILCS 155/18(b) and (c)], For transactions involving residential properties of four (4) or fewer units where at least one unit is occupied by a legal or beneficial owner, title insurance agents are **prohibited from providing services to an applicant for title insurance or services:**

- a) if the agent knows or believes the applicant was referred by a producer of title business or by an associate of such producer; **and**
- b) if the producer or associate has a financial interest in the title insurance agent **unless** the producer or associate has disclosed to any party who is paying for such product or services, (or to the party's representative), the financial interest of the producer or associate and disclosed an estimate of the charges to be paid.

Each title insurance agent shall file a report with this Department of those persons who are known or reasonably believed to be producers of title business or associates of producers and have such a financial interest. Therefore, please answer the following questions:

1. Is the agent engaged in Illinois in the trade, business, occupation or profession of buying or selling interests in real property? Yes ___ No ___
2. Is the agent engaged in Illinois in the trade, business, occupation or profession of making loans secured by interests in real property? Yes ___ No ___
3. Is the agent engaged in the trade, business, occupation or profession of acting as a broker, agent, attorney, or representative of natural persons or other legal entities that buy or sell interests in real property or that lend money with such interests as security? Yes ___ No ___

If any of Questions 1 through 3 is answered "Yes," please list entities or persons known, or reasonably believed by Agent, to be a producer of title business or an associate of such producer. [if the agent (individual) is the only known producer, please indicate "SAME"]

List names and addresses:

I, THE AGENT, HEREBY

1. agree to promptly notify the registering title insurance company of changes to my (the agent) contact information and entity structure;
2. agree to fully comply with the Title Insurance Act and the rules and regulations promulgated under it; and
3. certify that I personally completed this application and that the answers are true and correct to the best of my knowledge and belief.

Name of Person Signing Statement (printed) (NOTE 2)

Title

Signature

Date

NOTE 1 This question is to be completed only by agents registering as an individual. Please indicate "N/A" if not applicable

NOTE 2 To be signed by the agent if registering as an individual or by the principal, if registering as Corporation, Partnership, Limited Liability Company or Association.