

Lic # 0L01154

TITLE AGENCY QUESTIONNAIRE

Title Agents Underwriting Section

Audit Procedures			Yes	No
Is there an audit by an independent CPA or equival	ent?			
How often?				
All locations?				
GAAP Certified?				
Date of last audit?				
Any material discrepancies reported? (If yes, please	e detail discrepancy and corrective	e measures adopted.)		
Escrow Accounts			Yes	No
Do you deposit and reimburse funds for closing and	d settlement?			
Have you been operating as a title agent under this	or any other name for at least 3 y	ears?		
Are separate files and accounting records maintain	ed for each account?			
Does each file contain loan closing instructions?				
Does the file contain documentation of compliance	with instructions?			
Are all closing funds deposited into separate trust a	accounts?			
Are all escrow or trust funds reconciled by an inde	pendent party on a monthly basis	?		
Are you periodically audited by the title companies				
Does the principal or anyone having ownership into	erest have any unsatisfied judgem	ents or liens?		
Internal Controls			Yes	No
Is the countersignature of check required? If yes, a	t what dollar amount is this requir	red?		
If the countersignature of checks is not employed,	who signs all checks?			
Are bank accounts reconciled by someone not auth	orized to deposit or withdraw mo	ney?		
Are securities subject to joint control?				
Are there formal procedures for wire transfer of fur	nds? If yes, please attach a copy.			
Are there formal procedures for wire transfer of fur	nds? If yes, please attach a copy.			
Title Insurance Companies Represented				
Name of Carrier	Contact	Telephone Number		