

LAW OFFICES OF ANTHONY S. ADELSON, P.A.

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Hallandale Beach, Florida 33009

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Title Authorization Form

Date: _____

To: Fax:

From:

Re: Pages (including cover):

NOTES:

This will serve to confirm that I have elected to use the Law Offices of Anthony S. Adelson, P.A. to be the closing agent and to issue the title insurance on the purchase of the property located at:

The above is hereby agreed by:

(Buyer/Borrower)

(Buyer/Borrower)