

Missouri Land Title Association

Membership Application

ORGANIZATION INFORMATION

Organization Name: _____

Address 1: _____

Address 2: _____

City: _____

State: _____

Zip Code: _____

Missouri County where your office is located (if applicable): _____

Phone: _____

Fax: _____

Number of Licensed Employees: _____

Total Number of Employees: _____

Senatorial District: _____

State House District: _____

U.S. House District: _____

Organization Email Address: _____

Organization Web Site Address: _____

Primary Contact Person:

First Name: _____

Last Name: _____

Email Address: _____

Type of Member organization:

Individual _____

_____ Sole Proprietorship _____ Fictitious Name (d/b/a) _____ Attorney

Corporation _____

_____ C Corp _____ S Corp _____ Close _____ P.C.

Partnership _____

_____ General _____ Limited _____ Limited Liability

Limited Liability Company _____

Membership Category

The undersigned hereby makes application for membership in the Missouri Land Title Association under ONE (1) of the following categories as defined in the By-laws of the Associates.

CHOOSE ONLY ONE (*Requirements shown below)

1. Active _____

*Missouri Agency License Number: Underwriter License Number:

_____ or _____

*Underwriter Appointments: (Check ALL that apply.)

- _____ Chicago Title Insurance Company
- _____ Columbian National Title Insurance Company
- _____ Commonwealth Land Title Insurance Company
- _____ Fidelity National Title Insurance Company
- _____ First American Title Insurance Company
- _____ Land Title Insurance Company of St. Louis
- _____ Lawyers Title Insurance Company
- _____ Old Republic National Title Insurance Company
- _____ Stewart Title Guaranty Company
- _____ The Bar Plan Title Insurance Company

_____ TICOR Title Insurance Company
_____ United General Title Insurance Company

2. Affiliate _____

*Primary Business: (non-title agency)

* Vendor Primary Product:

3. Retired _____

Last Title Industry Experience/Employer:

If you have any questions about joining please contact our executive director Pam Hart, or any of the officers or directors.

In order to qualify as an active member, you must (a) be actively involved in the business of title assurance, (b) have a title insurance license issued by the State of Missouri, (c) have a place of business open on a regular basis and (d) agree to abide by the Code of Ethics and the bylaws and rules of the Missouri Land Title Association.

After your application is submitted and a deposit equal to one years dues is made, the application will be submitted to the board for approval at the next regular board meeting.