



Chicago Title Agency

of North Central Ohio, Inc

TAX AND LEGAL REQUEST

FAX REQUEST TO: 419-524-7252

Date of Request: _____ County of: _____

Requested by: _____ Office of: _____

PROPERTY OWNER: _____

PROPERTY ADDRESS: _____

LEGAL, if any available: _____

Year of Purchase, if available: _____

_____ Fax to: _____ Fax Number: _____

_____ Mail hard copy to: _____
Address: _____

Comments: _____

