

NEXUS INDIVIDUAL APPLICATION

NOTE: A SEPARATE INDIVIDUAL APPLICATION MUST BE COMPLETED BY EACH PRINCIPAL & KEY EMPLOYEE OF THE AGENCY

General Personal Information

Name of Company, Firm or Agency associated with this application: _____

▶ _____
 First Name Middle Initial Last Name Social Security Number

▶ _____
 E-mail Address related to work Direct Dial number at work (with Area Code)

▶ _____
 Full Current Residence Address Telephone Number (with Area Code)

▶ _____

▶ _____

▶ _____

▶ _____
 Prior Residence Addresses (Last 10 Years) Telephone Number (with Area Code)

▶ _____
 Date of Birth (MDY) Sex Driver's License No. State

****Please include a legible copy of your driver's license****

Business Position & Relationships

Your position with the Agency: _____ Ownership % in Agency, if any: _____ %

Responsibilities: _____

Are you, any member of your immediate family, or any company in which you have an interest in, a realtor, mortgage broker / originator, real estate investor, builder, developer, lender, or appraiser serviced by the Agency? Yes _____ No _____

If YES, provide details:

Work Experience – Last 10 Years – Starting with Most Recent Employment Dates:

▶	Dates From/To:	Complete Name and Address of Employer	Type of Business	Position Held
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Title Insurance License Information

Do you hold a valid Title Insurance Agent’s license? Yes ____ No ____ (if YES, please attach copy of EACH state’s license)
 States where you hold an Active License(s): _____
 If No, have you passed the required examination to obtain a license? Yes ____ No ____ When _____
 Have you ever had a title insurance license canceled, suspended or revoked? Yes ____ No ____ If Yes, please explain. _____

Disclosure of Escrow & Closing Practices

Do you handle and/or disburse funds for closings or settlements or supervise those who do? Yes ____ No ____ (If No, skip this section)

1. Is a separate file set up for each closing, containing the following information?
 a: Closing instructions: Yes ____ No ____
 b: Documentation of compliance with these instructions, including transfers between accounts: Yes ____ No ____

2. Are funds received for closings deposited in a trust bank account separate from operating funds and noted as such on bank statement? Yes ____ No ____ Name of each bank with escrow accounts: _____

3. Describe your experience in closing real estate transactions: _____

4. Do you use an integrated closing and reconciliation software? Yes ____ No ____ Name of software _____

5. Are separate accounting records maintained for each closing transaction? Yes ____ No ____

Background Information

1. Have you – or – any company in which you owned at least 10%, been a debtor in a bankruptcy action during the past 10 years?
Yes _____ No _____
2. Do you have any criminal record other than misdemeanor traffic violations? Yes _____ No _____
3. Are there any outstanding tax liens, judgments or any pending litigation against you? Yes _____ No _____
4. Have you been a principal – or – employee of any agency that has had its contract cancelled by any title insurance underwriter?
Yes _____ No _____ If the answers to any of the above questions are YES, please provide additional explanation to this application in the space below:

Give name and complete address of at least four (4) references outside your agency & immediate family, including two (2) bank or trade references having personal knowledge of your character and professional reputation:

<u>NAME</u>	<u>ADDRESS</u>	<u>PHONE</u>	<u>CONTACT PERSON</u>
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State in chronological order each high school, college, university or other institution attended, years attended, and degree received:

<u>NAME OF INSTITUTION</u>	<u>LOCATION</u>	<u>YEARS ATTENDED</u>	<u>DATE GRADUATED/DEGREE RECEIVED</u>
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Please Read The Following Statements Carefully Before Signing

By signing below, I certify the information provided, or statements made above or any attachment(s), to be true and correct. I understand that the information and/or statement shall be used to determine my agency's eligibility for appointment as an Agent. I understand that Entrust Solutions, LLC may verify and exchange information regarding this application and subsequent contractual agreements, including, but not limited to requesting investigative background checks, records of criminal matters, credit reports and/or consumer report, and that Entrust Solutions, LLC may contact these sources to update information at any time. I further understand that, upon reasonable written request, I may obtain additional information about certain report under the requirements of the Fair Credit Reporting Act. I understand any misleading or false information furnished by applicant shall constitute grounds for immediate termination of any agreement entered into between applicant and Entrust Solutions, LLC or subsidiary. I hereby further represent that I have authority to bind my agency if signing on their behalf.

Date

Applicant's Signature

Applicant's Name Printed Out

Agency Name: _____