

Preferred Provider Form

Title, escrow, attorney & insurance provider selection — Commercial BP Lender

Would you like to use our recommended companies to potentially expedite your loan process?

- ☐ Yes, I would like to use one of your recommended companies.
- ☐ No, I prefer to use my own Title / Escrow / Attorney service.

TITLE COMPANY CONTACT INFORMATION

Title Company Name		Contact Person	
Phone Number		Email Address	

ESCROW COMPANY CONTACT INFORMATION

Escrow Company Name		Contact Person	
Phone Number		Email Address	

ATTORNEY CONTACT INFORMATION

Attorney / Legal Firm Name		Contact Person	
Phone Number		Email Address	

INSURANCE AGENT CONTACT INFORMATION

- ☐ Yes, I would like to use one of our affiliated insurance companies.
- ☐ No, I prefer to use my own Insurance Agent.

Insurance Company Name		Contact Person	
Phone Number		Email Address	

ADDITIONAL COMMENTS OR INSTRUCTIONS

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Customer Signature

Date