



9041 S. Pecos Road, Suite 3900, Henderson, NV 89074  
Telephone: 866-486-5500 • Fax: 702-991-2910  
Email: [orders@udeed.com](mailto:orders@udeed.com) • Web: [www.udeed.com](http://www.udeed.com)

Thank you for choosign UDEED!

Enclosed you should find the following documents:

1. Fee Schedule
2. Instructions for Document Request Form
3. Document Request Form
4. Payment Form

If you have any questions on what you need fo complete or any other general questions, please call us otherwise please follow the instruction form attached and complete the Document Request Form along with the Payment Form.

When complete, please return only the Document Request Form and Payment Form to us via email or regular mail.



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## FEE SCHEDULE

<b>DOCUMENT PREPARATION SERVICES</b>		per document
<b>10 BUSINESS DAYS</b>		
Order processed <u>within 10 business days</u> of receiving a <b>complete order</b> .		<b>\$125.00</b>
<b>5 BUSINESS DAYS</b>		
Order processed <u>within 5 business days</u> of receiving a <b>complete order</b> .		<b>\$175.00</b>
<b>2 BUSINESS DAYS</b>		
Order processed <u>within 16 business hours</u> of receiving a <b>complete order</b> .		<b>\$225.00</b>
<p><b>DOCUMENT PREPARATION FEES DO <u>NOT</u> INCLUDE THE FOLLOWING:</b> Fee Calculations, Verification of Homeowner's Association Fees (HOA), fees associated with transfers that relate to HOA's or Timeshares, Transfer Taxes, Recording fees or any other related fees.</p> <p><b>COMPLETE ORDER:</b> (1) signed Scope of Representation, (2) completed and signed Document Request Form, (3) Invoice and Payment Form with payment, (4) copy of the last recorded deed and (5) any additional items that we have requested (i.e.</p>		

<b>RESEARCH SERVICES</b>		per document
<b>INFORMATION AND DOCUMENT RESEARCH SERVICE</b>		<b>\$25.00</b>
Research and retrieval of last recorded document and/or additional required information (i.e. parcel number, address and prior recording information). <u>This is not a title search.</u> Applicable		<b>(Clark County, NV)</b>
		<b>\$50.00</b>
		<b>(all others)</b>

<b>RECORDING SERVICES</b>		per document
<b>RECORDING SERVICE</b>		
Recording Service is a mail-in service. Any fees associated and/or assessed with the recordation of the document are <u>not</u> included in this fee. Some counties require walk-in service at an additional fee. We will contact you if this applies.		<b>\$35.00</b>

<b>FORM COMPLETION SERVICES</b>		per set
<b>FORM COMPLETION SERVICE</b>		
Forms are completed to the extent that required information can be obtained. Customers will <u>be instructed to provide additional information if required</u>		
New York City / Rhode Island (sale) / Wisconsin (New York City forms are prepared and delivered <i>after</i> signing of your deed)		<b>\$35.00</b>
All other States / Rhode Island (exempt)		<b>NO CHARGE</b>

<b>REVISIONS AND CANCELLATIONS</b>		
<b>REVISIONS</b>		
Revisions due to incorrect information on your order request or changes in your request or services. This fee is determined by the amount of revision necessary.		<b>\$15.00 - \$25.00</b>
<b>CANCELLATIONS</b> - After document has been completed but before delivery (Document Preparation Services only)		<b>50% refund</b>
<b>CANCELLATIONS</b> - After document delivery		<b>0% refund</b>

# DOCUMENT REQUEST FORM

## INSTRUCTIONS

The following is provided to assist you in completing your Document Request Form. Our goal is to prepare an accurate document for you in the quickest manner possible. **We will be using your Document Request Form and a copy of your last recorded deed to prepare your new deed.** An incomplete order package will result in the delay of your order. We will contact you to resolve any discrepancies as time permits. If, after reading this, you still have questions, please contact us at 866-486-5500 for assistance.

### **SECTION 1**

Indicate which deed type you wish us to prepare for you and/or whether you need an Affidavit to remove a deceased party from title. (Please note that you may not use an Affidavit to remove a party from title if that person is the only person listed on the title.)

### **SECTION 2**

Tell us how you wish us to deliver your document(s) to you for sign them.

### **SECTION 3**

Indicate which service you would like to order. Please refer to the Fee Schedule for pricing and delivery times. If you change the service requested on your Quote, please adjust the total on your Invoice and Payment Form appropriately.

### **SECTION 4**

Please complete all information on the Document Request Form and send a copy of the last recorded vesting deed. This document is usually titled **Deed, Warranty Deed, Grant Deed or Quitclaim Deed**, although it may have a different title. Your Deed contains the following information which we need: current owners' names, legal property description and recording information. We cannot use your Deed of Trust, Mortgage, Reconveyance, Release or Satisfaction, as these documents do not contain sufficient information or may not indicate the current owners. If (1) you do not have all of the required information, (2) you cannot send us the most current deed, or (3) if the deed does not provide sufficient information, please check YES to research on your Document Request Form. Please refer to the Fee Schedule for related fees and adjust your Invoice and Payment form appropriately. If you prefer to obtain this information yourself, the County Recorder and Assessor may be able to assist you. If you ask us to research, please include a tax bill to help us identify your property.

### **SECTION 5**

Tell us if you would like uDeed to record the document for you. Also, please tell us where to send the document after it has been recorded. Some states *require* this information to be listed on your deed, so please complete this information regardless of who will record your deed. If you add/remove this service, please refer to the Fee Schedule for related fees and adjust your Invoice and Payment form appropriately.

### **SECTION 6**

The GRANTOR is the "current owner" or "seller". Please list all persons or entities (i.e. trust, company, etc.) who will transfer their interest in the property. We must also know the current marital status of all persons listed. If any parties listed on the deed are currently deceased, please indicate so in this section.

### **SECTION 7**

The GRANTEE is the "new owner" or "buyer". Please list all persons or entities (i.e. trust, company, etc.) *exactly* as you would like them to appear on your new deed. We will change this only to accommodate state requirements or clarify title.

### **SECTION 8**

**GRANTEE VESTING** is for individuals only. If you need assistance with this section, please call toll free at 866-486-5500.

**RELATIONSHIP** is required in order to determine if your transfer is taxable or exempt from transfer tax. Please let us know who is husband, wife, parent, child, friend, business partner, etc. and if there are any special circumstances or reasons for the transfer.

**TRUST AND BUSINESS ENTITIES:** please list the beneficial owners of your entity and the percentage of ownership. If you do not know this, you may wish to contact the party who created your trust or company for assistance.

**NOTE:** the information in this section is crucial in preparing an accurate document and determining whether transfer tax is required. If this information is not disclosed or is incorrect, transfer tax and penalties may arise after the recordation of your document.

### **SECTION 9**

Some states require a reference to your current recorded deed in order to demonstrate how you obtained ownership. If you cannot find this information on your deed or if you are unsure which part of the deed is the recording information, leave this area blank. Be advised, however, that if this information is required and is not present on your deed, we will contact you for this information or for authorization to research it for you. Please refer to the Fee Schedule for research fees.

### **SECTION 10**

**PROPERTY ADDRESS:** Please complete the PROPERTY ADDRESS and COUNTY. If the property is vacant, please write vacant and complete the STATE and COUNTY.

**PARCEL ID:** This is a number that identifies your particular piece of property with the County Assessor or Tax office. Many states require the PARCEL ID NUMBER be listed on the deed or on an accompanying tax form. This is not always found on your current deed, but may be found on a tax bill or can be acquired from your County Assessor or Tax office. If you are transferring a timeshare and you do not receive the annual tax bill, you will need to contact the Assessor or Tax office for assistance or you can request us to research this for you. Please refer to research fees on the Fee Schedule. Note: Hawaii timeshares also require an ICN (Interval Control Number) identifying your unit and week. If this is not located on the deed, we will contact you.

**PROPERTY TYPE:** please indicate the type of property you are transferring.

**SALE PRICE & CURRENT MORTGAGE:** If you are selling your property, please enter the sale price. *Why do we ask for your mortgage?* If your property is in ALABAMA or FLORIDA, exemptions or transfer tax may be determined and based upon the current mortgage balance



# DOCUMENT REQUEST FORM

QUOTE NO: \_\_\_\_\_

Fax to: 702-991-2910

Customer Service: 866-486-5500

COMPANY: _____	DATE: _____
CONTACT: _____	PHONE: _____
ADDRESS: _____	FAX: _____
CITY/STATE/ZIP: _____	EMAIL: _____

<b>1 DOCUMENT REQUESTED:</b> <input type="radio"/> QUITCLAIM DEED (NOT AVAIL: TX) <input type="radio"/> WARRANTY DEED (NOT AVAIL : CA NV NJ) <input type="radio"/> GRANT/GRANT, BARGAIN, SALE DEED (CA NV NJ NY ONLY) <input type="radio"/> AFFIDAVIT (INCLUDE COPY OF DEATH CERT)	<b>3 SERVICE REQUESTED:</b> <input type="radio"/> 10 BUS DAY <input type="radio"/> 5 BUS DAY <input type="radio"/> 2 BUS DAY
<b>2 RETURN COMPLETED ORDER TO CONTACT ABOVE BY:</b> <input type="radio"/> EMAIL (PDF FORMAT TO EMAIL CONTACT LISTED ABOVE) <input type="radio"/> US MAIL	<b>4 RESEARCH SERVICE:</b> <input type="radio"/> YES <input type="radio"/> NO (DEED & ALL INFO IS INCLUDED)
	<b>5 RECORDING SERVICE:</b> <input type="radio"/> YES <input type="radio"/> NO (CLIENT WILL RECORD) PLEASE RETURN RECORDED ORIGINAL TO <input type="radio"/> CONTACT LISTED ABOVE

**6 GRANTOR:**  
 LIST ALL PARTIES WHO WILL TRANSFER AN INTEREST AND THEIR MARITAL STATUS (NEVER MARRIED, MARRIED, DIVORCED OR WIDOWED). ALSO

**MAILING ADDRESS:**

**7 GRANTEE:**  
 LIST EXACTLY AS YOU WOULD LIKE IT TO APPEAR ON YOUR NEW DEED. INCLUDE MARITAL STATUS (NEVER MARRIED, MARRIED, DIVORCED OR WIDOWED)

**MAILING ADDRESS:**

**8 GRANTEE VESTING:**     JOINT TENANTS     TENANTS IN COMMON     TENANTS BY ENTIRETY  
 (INDIVIDUALS)     SOLE & SEPARATE     COMMUNITY PROP W/ SURV     COMMUNITY PROP W/O SURV

**EXPLAIN RELATIONSHIP BETWEEN GRANTOR/GRANTEE:** \_\_\_\_\_

**TRUST/BUSINESS ENTITIES:** (TRUSTEES / OWNERS & % INTEREST) \_\_\_\_\_

<b>9 RECORDING INFO :</b>	DATE: _____	BK: _____	PG: _____	INST NO: _____
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**PROPERTY ADDRESS:** \_\_\_\_\_ ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

**COUNTY:** \_\_\_\_\_

**PARCEL ID NO.:** \_\_\_\_\_

**SALE PRICE:** (FOR SALES ONLY) \_\_\_\_\_

**CURRENT MORTGAGE:** (AL & FL ONLY) \_\_\_\_\_

**PROPERTY TYPE :**  
 HOUSE     CONDO/APARTMENT  
 MULTI-UNIT     TIMESHARE  
 VACANT/RES     VACANT/NON-RES  
 OTHER \_\_\_\_\_

**SEND FUTURE TAX BILLS TO:** \_\_\_\_\_

**TIMESHARE NAME AND ADDRESS:** (IF TIMESHARE) \_\_\_\_\_

**CLIENT SIGNATURE:** \_\_\_\_\_ I have reviewed this form and acknowledge that it is correct to the best **X**



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## PAYMENT FORM

Primary Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone number of primary contact person: \_\_\_\_\_

Email address of primary contact person: \_\_\_\_\_

Description and Service	Qty	Rate	Amount
<b>COMPLETE DEED REQUEST (Check here: ____)</b>	_____	\$245	\$ _____
<u>Below is for BASIC ordering only:</u>			
New Property Deed	_____	\$125	\$ _____
Deed Research	_____	\$50	\$ _____
City, County & State Forms Completion	_____	\$35*	\$ _____
Calculate Recording Fees	_____	\$20	\$ _____
Filing with County Recorder	_____	\$35	\$ _____
Expedited Processing	_____	\$50	\$ _____
<b>Total:</b>			<b>\$ _____</b>

**PAYMENT OPTIONS (please choose one):**

**Check payable to uDeed** (please send your check payment by mail with your order)

**Credit Card:**     Visa     MasterCard     American Express     Discover

Billing Address (if different from above): \_\_\_\_\_

***By Signing this Payment Authorizaion Form, I authorize uDeed, LLC to charge the above amount as well as any additional fees associated with my order to my credit card or debit card***

Signature of Cardholder: \_\_\_\_\_