Issuing Agent:

Issuing Office:

ALTA® Registry ID:

Loan ID Number:

Commitment Number:

Issuing Office File Number:

Property Address:

Revision Number:

***Disclosure pursuant to D.C. Code §31-5041.05***

**Please read the exceptions and the terms shown or referred to herein carefully. The exceptions are meant to provide you with notice of matters which are not covered under the terms of the title insurance policy and should be carefully considered.**

**It is important to note that this form is not a written representation as to the condition of title and may not list all liens, defects, and encumbrances affecting title to the land.**

# Schedule A

1. Commitment Date:

2. Policy to be issued:

a. **[**2021 ALTA® Owner’s Policy**][**2021 ALTA® Loan Policy**][**\_\_\_\_\_ ALTA® \_\_\_\_\_\_\_\_\_\_ Policy**]**

Proposed Insured: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Proposed Amount of Insurance: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The estate or interest to be insured: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**[**b. **[**2021 ALTA® Owner’s Policy**][**2021 ALTA® Loan Policy**][**\_\_\_\_\_ ALTA® \_\_\_\_\_\_\_\_\_\_ Policy**]**

Proposed Insured: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Proposed Amount of Insurance: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The estate or interest to be insured: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**]**

**[**c. **[**2021 ALTA® Owner’s Policy**][**2021 ALTA® Loan Policy**][**\_\_\_\_\_ ALTA® \_\_\_\_\_\_\_\_\_\_ Policy**]**

Proposed Insured: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Proposed Amount of Insurance: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The estate or interest to be insured: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**]**

3. The estate or interest in the Land at the Commitment Date is: (Identify each estate or interest covered, i.e., fee, leasehold, etc.).

4. The Title is, at the Commitment Date, vested in: *(Identify vesting for each estate or interest identified in Item 3 above)*

 5. The Land is described as follows:

**WFG NATIONAL TITLE INSURANCE COMPANY**

**By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Authorized Signatory**