

**MIDWESTERN EQUITY TITLE INSURANCE COMPANY**

**PROPERTY OWNER(S) LIEN AFFIDAVIT**

LENDER: First National Bank

OWNER(S): Jason R Burdge, Shannon L Burdge

PROPERTY ADDRESS: 10 Noland Rd, Greencastle, IN - 46135

1. The owner(s) listed above is (are) the sole owner(s) of property: **Yes**
2. Title to this residence is held as: **Married couple or two or more related persons**
3. Residential Occupancy: **Yes**
4. The only liens against this residence are as follows:

<b>Lender or Other Lien Holder</b>		<b>Balance</b>
First Lien	First National Bank #53629	\$ 108,645.51
Second Lien	First National Bank #70012539	\$ 50,000.00
Other Lien(s)		\$ 0.00

5.

<b>Please initial correct response below</b>	<b>Yes</b>	<b>No</b>
All real estate taxes and assessments are paid in full.	Yes	
This Property is free of State and Federal tax liens.	Yes	
This Property is free of Judgements.	Yes	
<b>Has owner filed bankruptcy in the past 90 days?</b>		
<b>Does this property have a reverse mortgage?</b>		

This Affidavit is given to induce First National Bank (Lender) to make the loan. We (I) state that the above information is true and complete and understand that any intentional or negligent misrepresentation (s) of the information contained in this Affidavit may result in civil liability and/or criminal penalties including, but not limited to, fine or imprisonment or both under the provisions of Title 18, United States Code, Section 1001, et seq. and liability for monetary damages to Lender, its agents, successors and assigns, insurers, and any other person who may suffer any loss in reliance upon any misrepresentations when made in this Affidavit.

Signatures: \_\_\_\_\_

Signature of Owner's Spouse if Not Owner: \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

State of: \_\_\_\_\_ County of: \_\_\_\_\_ My comission expires: \_\_\_\_\_

Notary Signature: \_\_\_\_\_

**Original for Loan File**

**Copy for Borrower**

Borrower(s) : **Jason R Burdge, Shannon L Burdge** Financial Institution: **First National Bank**

Property Address: **10 Noland Rd, Greencastle, IN - 46135**

Application No#: **70012539** Loan Amount: **\$ 50,000.00**

Effective Date: **09/10/2024** Loan Term: **120 Months**

**POSSIBLE HOME EQUITY LIEN PROTECTOR (HELP) COVERAGE IN LIEU OF TITLE SEARCH**

This loan may qualify for the Home Equity Lien Protector coverage which protects the lender against losses due to impairments to the title on fixed term equity loans and equity lines of credit. Please refer to the Master Policy on file for all benefit or eligibility questions.

**If this is a covered loan, the following items MUST be in the loan file at all times:**

       **Copy of Credit Report**

       **Original of Property Owner(s) Affidavit**

       **Copy of Property Tax Bill or First Mortgage or Deed**

**NO COVERAGE WILL BE IN FORCE UNLESS THE PREMIUM IS PAID AND THE LOAN APPEARS ON THE MONTHLY REPORT SUBMITTED TO MIDWESTERN EQUITY TITLE INSURANCE COMPANY.**