

Meridian Operations – Mortgage Department
Phone: 1-866-516-3044 Option 1
Fax: 905-988-1713

The Solicitor's Interim Report/Requisition for Funds, completed in full (including Title Insurance Certificate / Policy Number) is to be faxed to Meridian Credit Union at least 2 business days prior to the date funds are required.

RE: _____ Meridian Credit Union Ref No.: _____

Mortgagor(s)

Guarantor(s)

Civic Address of Property Mortgaged

Legal Description

Registered Charge Amount (\$)

☐ First ☐ Second ☐ Bridge Loan Funds Required

Mortgage Position

Amount Requisitioned (\$)

Interest Adjustment Date / Date Funds Required

☐ \$ _____ ☐ Full Insurable Value

Amount of Fire Insurance Coverage

Name of Municipal Tax Office

Roll No.

Annual Tax Amount (\$)

Next Instalment Due Date

Property Taxes Outstanding (\$)

THE UNDERSIGNED HEREBY CERTIFIES THAT WHEN THIS ADVANCE IS MADE

1. The Mortgagor(s) will have executed a Mortgage in accordance with your Instructions, Mortgage Commitment and any subsequent Amendments, if applicable.

2. The Mortgage will be title insured by the Title Insurance Company set out below without any exceptions or qualifications except those set out in the insurer's standard form of policy.

3. All requirements in the Instructions to Solicitor relating to title insurance and additional title and non-title issues will have been met.

4. Details of Fire, Hazard and other insurance as specified in your instructions will have been verified.

5. Your requirements with respect to Guarantors and the taking of collateral security, as defined in your Mortgage Commitment and your instructions will have been met.

6. All Tax Bills issued up to the Interest Adjustment Date will have been paid in full.

7. Unless otherwise recorded below, all registered restrictions or building / zoning by-laws and regulations and provincial statutes will have been complied with and there are no easements, encroachments or other qualifications (including taxes) **EXCEPT** as noted below. You were informed of these matters prior to this report and these were accepted by you. They are detrimental neither to your security nor to the marketability of title.

(PARTICULARS OF EXCEPTIONS)

Name of Title Insurance Company

Individual Title Insurance Certificate Number

Date: _____

X

Signature of Solicitor

☐ Trust Account # _____ Transit # _____ Bank/Institution ID # _____
(A void cheque **MUST** be provided)

Name of Financial Institution, Branch #, and Address

☐ Funds to be picked up at the local Meridian Credit Union branch located at _____

Funds will be remitted to the individual or law firm to whom the Instructions to Solicitor for the mortgaged property were addressed. Please insert the name below and ensure that this corresponds to the account number indicated above.

Name of Law Firm

Telephone Number

Fax Number

Mailing Address

***Funds cannot be provided via credit to your Trust Account unless all requirements are met & received from the following: Members, Branch, Mobile Mortgage Specialists (MMS) and Solicitors. Any additional paperwork is to be provided to Meridian at least 2 business days prior to the date funds are required. If this provision is not met, please provide a Meridian Credit Union branch location for funds pick up.**