**Iconic Title Agency LLC​​**

**1815 Lakewood Road, Suite 127, Toms River, NJ 08755​​**

**Telephone:** **(732) 592-4400​​**

**Fax:** **(732) 592-4149​​**

**Loan Closing Identification Statement**

MORTGAGEE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_​​

BUYERS/MORTGAGORS: ​​

SELLERS: ​​

PROPERTY ADDRESS:

CLOSING DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_​​

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, closing attorney for the above-captioned transaction, hereby state as follows:

BUYERS: SELLERS:

 [ ]  [ ]  I have personal knowledge of said parties through previous

Business dealings.

 [ ]  [ ]  I am confident that said parties are who they claim to be

through current transaction dealings.

 [ ]  [ ]  Attached are copies of acceptable forms of identification.

 [ ]  [ ]  I have requested and reviewed identification at closing and I am

confident that said parties are who they claim to be.

Closing Attorney

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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