



Texas Department of Insurance

Property & Casualty Title MC 106-2T
333 Guadalupe • P. O. Box 149104, Austin, Texas 78714-9104
512- 322-3482 telephone • 512-305-7426 fax • www.tdi.state.tx.us

**NOTICE OF CESSATION
OF TITLE INSURANCE BUSINESS**

The undersigned title insurance agent or direct operation, herein called "Agent", hereby gives formal notice of its intent to cease operations in the business of title insurance. The following funds are being held in the escrow accounts of said Agent:

GF No.	Amount	Name of Seller	Name of Buyer
_____	\$ _____	_____	_____

If these funds cannot be released by said agent within the next forty-five (45) days, all funds held in the escrow accounts, together with the respective files shall be delivered to the title insurance underwriter at the following address:

Name of Company: _____

Address: _____

City/State/Zip: _____

Telephone: _____

If the parties to a transaction cited above wish to transfer said funds to another title insurance agent, a written notice signed by all parties authorizing the release and transfer of said funds and documents must be delivered to the undersigned agent prior to the _____ day of _____, 20_____.

Dated: _____, 20_____.

AGENCY/DIRECT OPERATION NAME

By: _____