

EXAMINATION WORKSHEET

FILE NAME/NO. 100-HUMBUYER COUNTY DAUPHIN

SEARCH PERIOD: From: 1955 To: 1/11/2021 2:20 AM PM

If update from prior policy--Policy # & Title Company _____ (Attach Copy)

If search is not an update from prior policy and does not begin with a warranty deed recorded at least 30 years ago, explain below:

BUYER/INSURED: JOSE HUMBUEYER AND HANNAH HUMBUEYER

SELLER/CURRENT VESTED OWNER: SAMMY SELLERS AND SARA SELLERS

INSTRUMENT (ATTACHED) VESTING TITLE IN CURRENT OWNER RECORDED IN: 201200001111

ADDRESS: 123 MAIN STREET HARRISBURG, PA

BRIEF LEGAL DESCRIPTION: _____

USE OF PROPERTY: COMMERCIAL _____ RESIDENTIAL X OTHER _____

SALES PRICE: \$ 210,000 LOAN AMOUNT: \$ 189,500

NEW LENDER: _____

LOAN TYPE: CONV _____ FHA _____ VA _____ Perm Const _____ Temp Const _____ Other _____

TITLE ENDORSEMENTS: ALTA 4(Condo) _____ ALTA 5(PUD) _____ ALTA 6(Variable Rate) _____
ALTA 7(Mobile Home) _____ ALTA 8.1(Environmental) _____ ALTA 9(Comprehensive) _____
Other _____

MOBILE HOME LOCATED ON PROPERTY? _____ If yes, to be insured as real estate? _____

TAX PARCEL NO: 11-100-0000-000-0000 ASSESSED VALUE: \$ 170,000

TAXES PAID THRU: 2016 TAXES NOW DUE & PAYABLE: \$ 2213.27

EXEMPTIONS/DEFERRALS: Type: _____ Amount: \$ _____

ASSESSMENTS DUE OR PAYABLE IN FUTURE INSTALLMENTS: \$ _____

MORTGAGES

:(Copies Attached)

To: PNC BANK

Date: 7/26/2012 Book 337 Page 101 Amount \$ 143,500.00

Circle one: Pay Remain Subordinate

To: PA CONSUMER DISCOUNT CO.

Date: 10/4/1984 Book 14 Page 123 Amount \$ 7840.22

Circle one: Pay Remain Subordinate

To: _____ Trustee: _____

Date: _____ Book _____ Page _____ Amount \$ _____

Circle one: Pay Remain Subordinate

RESTRICTIVE COVENANTS:

Book _____ Page _____; Book _____ Page _____;
Book _____ Page _____; Book _____ Page _____;
Book _____ Page _____; Book _____ Page _____;
Setbacks: Front: _____ Side: _____ Interior: _____ Rear: _____
Easements per covenants: _____
Other: _____

PLAT OR MAP: Book _____ Page _____;
Setbacks: Front: _____ Side: _____ Interior: _____ Rear: _____
Easements per plat: _____
Private roads, common areas, restrictions, or other matters: _____

ACCESS TO PUBLIC RIGHT OF WAY:

Access to Public Right of Way: Yes ☐ No ☐.
Direct ☐; or over a private easement ☐
If over a private easement, has a search been made of the easement and underlying tract prior to easement creation? Yes ☐ No ☐

EASEMENTS, UCC'S OR OTHER DEFECTS, LIENS OR ENCUMBRANCES:

Verizon in Deed Book 300 Page 122

Comcast in Deed Book 900 Page 12

United Water in Deed Book 200 Page 57

MISCELLANEOUS NOTES OR REMARKS:

ABSTRACT OF ESTATE FILE NUMBER: _____
DAUPHIN COUNTY

DECEDENT: **BETTY BYERS**

Date of Death: _____

County of Domicile at Time of Death: **DAUPHIN**

Decedent Died: _____ Intestate
☒ **X** Testate Date of Last Will and Testament: _____
 Date of Codicil(s) If Any: _____
 Date Will Admitted to Probate: _____

Any information that indicates Decedent left a Last Will and Testament/Codicil which has not been admitted to probate? (____) Yes (☒ **X**) No If Yes, indicate reason not admitted and source of information:

Personal Representative(s): **BRIAN BYERS**

Date of Qualification of Personal Representative(s): _____

Persons/entities entitled to share in Decedent's estate *pursuant to above-captioned Estate File:*

NAME/MARITAL STATUS	AGE	RELATIONSHIP
BRIAN BYERS	N/A	SON

Other persons that may be entitled to share in Decedent's estate based on information available in the public records or elsewhere (indicate source of information):

BRIAN BYERS (SON)

Affidavit of Publication of Notice to Creditors in Estate File? (____) Yes (____) No

If Yes: Dates published: _____
 Name of newspaper: _____
 County in which newspaper published: _____

Tax Release(s)/Certification(s) in Estate File? (____) Yes (____) No

If Yes: Date and description of release(s)/certification(s): _____

Final Account Filed? (____) Yes (____) No

If Yes: Date of Filing: _____

Attorney for Estate: _____

Notes/Remarks:

ABSTRACT OF ESTATE FILE NUMBER: _____
DAUPHIN COUNTY

DECEDENT: **BOB BYERS**

Date of Death: _____

County of Domicile at Time of Death: **DAUPHIN**

Decedent Died: _____ Intestate
☒ **X** Testate Date of Last Will and Testament: _____
 Date of Codicil(s) If Any: _____
 Date Will Admitted to Probate: _____

Any information that indicates Decedent left a Last Will and Testament/Codicil which has not been admitted to probate? (____) Yes (☒ **X**) No If Yes, indicate reason not admitted and source of information:

Personal Representative(s): **BETTY BYERS**

Date of Qualification of Personal Representative(s): _____

Persons/entities entitled to share in Decedent's estate *pursuant to above-captioned Estate File:*

NAME/MARITAL STATUS	AGE	RELATIONSHIP
BETTY BYERS	N/A	WIFE

Other persons that may be entitled to share in Decedent's estate based on information available in the public records or elsewhere (indicate source of information):

BRIAN BYERS (SON)

Affidavit of Publication of Notice to Creditors in Estate File? (____) Yes (____) No

If Yes: Dates published: _____
 Name of newspaper: _____
 County in which newspaper published: _____

Tax Release(s)/Certification(s) in Estate File? (____) Yes (____) No

If Yes: Date and description of release(s)/certification(s): _____

Final Account Filed? (____) Yes (____) No

If Yes: Date of Filing: _____

Attorney for Estate: _____

Notes/Remarks:

JUDGMENTS AND LIENS

LIEN	TYPE OF LIEN	IN REM or IN PERSONAM	PAYOFF
Nina Newhouse	Federal Tax	In Personam	Payoff needed or proof of payment
Sara Sellers	Municipal Lien	In Rem	Payoff needed or proof of payment
Sara Sellers	Civil Judgment	In Personam	Payoff needed or proof of payment
Sara Sellers	State Lien	In Personam	Payoff needed or proof of payment
Sammy Sellers	Multiple Liens	** Verify and Require Affidavit	