



Terry J. Brown

Franklin County Recorder

Escrow Account Policy

1. Escrow accounts require a written application. A minimum deposit of \$100.00 is due when submitting an application. The deposit may be made by cash, check or money order.
2. Escrow account balances may incur fees due in the both Recording Services Department and Micrographics Department of the Franklin County Recorder's Office. Depending upon projected usage, escrow account holders may deposit more than the minimum deposit.
3. Once established, subsequent deposits may be made by cash, check, or money order.
4. Cash cannot be withdrawn from an account. Only reimbursements of the entire balance and closure of the account are permissible. Partial reimbursements will not be made. Requests for reimbursements must be in writing and signed by the Authorized Signor on the account application. Reimbursements from the Recorder's Office shall be by check issued from the Franklin County Auditor's Office. The check will be payable to the account holder whose name appears on the account application.
5. Escrow account withdrawals may only be used for Recorder's fees. Withdrawals will only be permitted to the authorized users listed on the application.
6. The Recorder has the right to close any escrow account at any time, with or without cause and without prior notice. It is not the responsibility of the Recorder to update escrow information without notice such as: current mailing address, phone number, fax number and authorized users of the account. Inactive accounts in a 90-day period may be subject to closure. Refunds will be sent to the current mailing address listed on the account.
7. The Recorder has the right to apply reasonable service charges for bookkeeping or processing when deemed necessary. Returned checks may result in the Recorder debiting costs incurred for services provided (Ohio Revised Code 317.32) from funds previously established in escrow with the Recorder's Office. Until matters are resolved, the Recorder reserves the right to deny a service paid for by escrow.
8. No service will be provided without sufficient funds in the escrow account.
9. Escrow accounts may not be accessed for document recordation after 5:00 p.m.
10. The primary contact for the account will be provided login information for the account. It is the primary contact's discretion as to whom they provide the login name and password. It is also the primary contact's responsibility to change the password as necessary.
11. The primary contact will receive a monthly statement detailing debits and credits to their account. It is their responsibility to balance their account and notify the County Recorder's office of any disputed debits or credits. This report can also be downloaded on demand using CountyFusion.



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APPLICATION TO ESTABLISH AN ESCROW ACCOUNT
(PLEASE TYPE OR PRINT)

Company Name: _____

Primary Contact Name: _____

Address: _____

Telephone: _____ Fax _____

Email: _____

CountyFusion Username: _____

(The administration of the account will be tied to the Primary Contact's username. If no username is provided, one will be assigned by Franklin County and sent to the Primary Contact.)

AUTHORIZED USERS

AMOUNT ATTACHED: \$ _____ _CHECK _____ MONEY ORDER

AUTHORIZED SIGNATURE

TYPE OR PRINT AUTHORIZED SIGNATURE

DATE

APPROVED: _____ DATE: _____

ESCROW ID: _____



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FAX PROCEDURES

1. No certified documents will be produced or accepted by FAX transmission.
2. No documents shall be recorded utilizing FAX.
3. Anyone transmitting a FAX order for processing must have a current escrow account or remit cash, check or money order prior to the transmission at the Recorder's Office Micrographics counter.
4. All orders transmitted after 5:00 p.m., Monday through Friday, weekends and holidays, will be processed on the next business day.
5. All requests shall be for Recorder's Office documents only.
6. Charges are as follows:
 - a. Outgoing FAX from Recorder's Office - \$2.00 per page (local) and \$4.00 per page (long distance)

FOR EXAMPLE:

- A) You have faxed the appropriate request form to the Recorder's Office requesting a copy of a document containing ten (10) pages; when completed, the copy will be held at the counter for pickup:

10-pages copied @ \$2.00	<u>\$20.00</u>
Total Due	\$20.00

- B) Based upon the same copy request, but asking that the documents be faxed from the Recorder's Office to you:

10-pages copied @ \$2.00	\$20.00
10-pages Faxed @ \$2.00	<u>\$20.00</u>
Total Due	\$40.00

NOTE: Attached is a copy of the appropriate request form. Please make copies for future use.



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Fax Order Form

FAX NUMBER: (614) 525-4299
PLEASE PRINT LEGIBLY

Order placed by: _____

Date: _____

Time: _____

Hold at Counter

Return by FAX

Account Name/Contact Person: _____

Telephone: _____ FAX: _____

	Document Type	Volume	Page	FILINGS AFTER MAY 15, 1997 INSTRUMENT NUMBER	OFFICE USE ONLY
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

AR – Assignment/Release
MI – Mechanic’s Lien

DB – Deed Book
MO Mortgage Record

FS – Financing Statement
OR – Official Record

LE – Lease Record
 Other

Recorder’s Office Use Only

Request Filled By: _____

Notes: