

4000.00

OKLAHOMA ABSTRACTORS BOARD ABSTRACT FEE SCHEDULE – TIME BASED FILING

*** The Oklahoma Abstractors Board shall notify the applicant in writing of any action taken with regard to the requested fees within 60 days of submission. If no notice is provided regarding the submitted fees, they will be deemed to become effective on the 61st day following the day the application was submitted to the Board. Title 1 provides that all abstracting charges shall be separately stated and shall not be combined with title insurance, closing fees or examination charges on all invoices, statements, settlement statements and consumer estimates. If your company does not offer the particular product, type "N/A" in the appropriate area. Only type written schedules will be accepted.

Check Appropriate Filing:

- Annual Filing- No Change
- Annual Filing-Amended Fees
- Special Filing-Amended Fees

ABSTRACT COMPANY: Atoka Abstract LLC COUNTY Atoka
 ADDRESS: 334 E Court CITY: Atoka ZIP: 74525
 PHONE: 5808897316 FAX: 5808897317 E-MAIL ADDRESS: atokaabstract@atokaabstract.com
 CONTACT PERSON: Tara Sandmann REQUESTED EFFECTIVE DATE: _____
 (please allow 60 days to process)

This area to be used by the OAB Office:

Date Received by OAB: 4-01-24 Reviewed by: Enf.Com
 Executive Director Initials: VS Effective Date: 5-22-24

TIME-BASED FILING

APPROVED
 MAY 21 2024
 OKLAHOMA ABSTRACTORS BOARD
 EXECUTIVE DIRECTOR
Board Approval Stamp

I. UNIFORM ABSTRACT CERTIFICATION

A. SURFACE ABSTRACT CERTIFICATION - CONTINUATION						
Time Period:	Less than 1 year	1 year > 2 year	2 year > 5 year	5 year > 10 year	10 year > 15 year	15 years or more
Platted Cost:	400.00	500.00	600.00	675.00	700.00	800.00
Unplatted Cost:	400.00	500.00	600.00	675.00	700.00	800.00

B. SURFACE ABSTRACT CERTIFICATION - SUPPLEMENTAL						
Time Period:	Less than 1 year	1 year > 2 year	2 year > 5 year	5 year > 10 year	10 year > 15 year	15 years or more
Platted Cost:	400.00	500.00	600.00	675.00	700.00	800.00
Unplatted Cost:	400.00	500.00	600.00	675.00	700.00	800.00

C. SURFACE ABSTRACT CERTIFICATION – FROM SOVEREIGNTY						
Time Period:						
Platted Cost:	1,000.00					
Unplatted Cost:	1,000.00					

D. SURFACE ABSTRACT - RECERTIFICATION						
Platted Cost:						
	1,000.00					

Unplatted Cost:	1000.00			
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II. MULTIPLE ABSTRACTS – NEW SUBDIVISION/NEW CONSTRUCTION

Uniform Abstract Certificate:

#1 abstracts: 1,000.00 # abstracts: _____
 # abstracts: _____ # or more abstracts: _____

Conditions/Restrictions: _____

III. MINERAL ABSTRACT CERTIFICATION

IV. FINAL CERTIFICATION ISSUANCE FOR TITLE INSURANCE

Uniform Abstract Certificate: 500.00
 Charge per page: 7.00
 Other fee: _____
 Conditions/Restrictions: _____

Abstract Extension or Supplemental
 (180 days or less): 400.00

 Final Title Report for Issuance
 of Title Insurance: 250.00

V. MULTIPLE TRACTS

Fees listed above are limited to 1 block or 1 contiguous section parcel in same section _____

Additional blocks or quarter sections under same caption will be charged \$250.00 each _____

RATES LISTED BELOW ARE NOT REGULATED BY THE OAB
For Informational Purposes Only

- | | |
|--|---|
| <p>A. Uniform Commercial Code Certificate: <u>75.00</u>
 Number of names checked: <u>6.00</u>
 Price for each additional name: <u>2.00</u></p> <p>B. Unmatured Special Assessments Certificate: _____</p> <p>C. Special Certificate:
 Buyer Name Certificate: <u>175.00</u>
 Number of names checked: _____
 Price for each additional name: <u>25.00</u></p> <p>D. Special Certificate:
 Judgments and Liens: <u>175.00</u>
 Number of names checked: _____
 Price for each additional name: <u>25.00</u>
 Additional pages: _____</p> <p>E. Special Court Transcript Certificate: <u>75.00</u>
 Additional pages: <u>4.00 per page</u></p> | <p>F. Federal Court Certificate: _____
 Number of names checked: _____
 Price for each additional name: _____
 Federal District Searched: _____</p> <p>G. Other Special Certificates:
 Special Certificate: <u>200.00</u>
 (Specify): <u>Evidentiary affidavit</u>
 Conditions/Restrictions: <u>4 names</u>
 Additional pages: _____</p> <p>Special Certificate: _____
 (Specify): _____
 Conditions/Restrictions: _____
 Additional pages: _____</p> <p>H. Pre Closing Gap Check: <u>75.00</u></p> |
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