

# Iowa Land Title Association

## Title Plant Certification Program

*This voluntary program is a complement to the Abstractor Certification Program, and provides member and non-member title companies an opportunity to differentiate themselves from their competition.*

A **member** firm that has had a successful plant inspection, per ILTA records, may enroll in the program by completing and returning (along with the inspection fee) a signed affidavit confirming that their plant is actively maintained and meets all established criteria for a viable title plant. Those firms may immediately promote their plant as “Certified.” (use Affidavit provided)

A firm that has not had its title plant previously inspected would not be able to promote its plant as “Certified” until a successful inspection has been done.

In order to retain its “Certified” status, a plant must be inspected every five (5) years. A certificate will be presented to the plant’s owner upon each successful inspection.

If a plant has not been inspected since January 1, 1989, then the first inspection under this program will be a 40-year inspection. If a plant has been inspected after that date, then its first inspection under this program will be from the date of the last inspection. Inspections will be scheduled upon return of the necessary documents.

ILTA will provide certificates for successful inspections, and provide an ILTA Certified Title Plant Logo that may be incorporated into a company’s certificate page or for other marketing purposes. *Please note that this logo is trademarked by the association and may be used only by permission of the ILTA for purposes of marketing by members successfully enrolled in the program.*

Inspection Fees:    \$200.00 per inspection for members                      \$500 per inspection for non-members

**MEMBERS WITH PREVIOUSLY INSPECTED PLANTS: RETURN YOUR AFFIDAVIT AND INSPECTION FEE TO:** ILTA, P.O. Box 444, Carroll, IA 51401

**MEMBERS AND NON-MEMBERS SCHEDULING FIRST INSPECTIONS: RETURN THIS FORM AND INSPECTION FEE TO:** ILTA, P.O. Box 444, Carroll, IA 51401

ILTA Member

Non-Member

Contact  
Name \_\_\_\_\_ Company \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Zip \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

Make checks payable to ILTA

*Thank You!*