

1435 W SR 434 SUITE 109, LONGWOOD, FL 32750

Attention:

Seller 1:

Closing date:	Sale price	:	Escrow deposit:			
Company holding deposit:						
Bring deposit to closing: Yes No	Deduct department from commission: Yes		es No			
Legal description:						
Property address:						
City:	State:	State:		Zip:		
Buyer 1:		Buyer 1 email:				
Home phone:		Work phone:				
Will Buyer reside in property? Yes	No					
Marital status: Single Married	Divorced	Widowed				
Buyer 2:		Buyer 2 email:				
Home phone:		Work phone:				
Will Buyer reside in property? Yes	No					
Marital status: Single Married	Divorced	Widowed				
Address:						
City:	State:			Zip:		
Is this a mail away to Buyer? Yes	No					
Mail away address:						
City:	State:			Zip:		

Seller 1 email:

Seller 1 SSN:	Does Seller still live in property? Yes No						
United States citizen? Yes No	If not, when did they move out?						
Home phone:	Work phone:						
Marital status: Single Married Divo	orced Widowed						
Seller 2:	Seller 2 email:						
Seller 2 SSN:	Does Seller still live in property? Yes No						
United States citizen? Yes No	If not, when did they move out?						
Home phone:	Work phone:						
Marital status: Single Married Dive	orced Widowed						
Address:							
City: State	e: Zip:						
Is this a mail away to Seller? Yes No							
Mail away address:							
City: State	e: Zip:						
<u>'</u>							
Listing office address:							
City: State	State: Zip:						
Realtor:							
Realtor email:	Phone: Fax:						
Transaction fee to seller? Yes No Amount:							
Commission rate: \$ L.O:	S.O.:						
Selling office address:							
City: State	e: Zip:						
Associate:							
Selling office email:	Phone: Fax:						
Transaction fee to seller? Yes No Amo	Amount:						

1st Mortgage CO:		Loan 1 #:			
Address:					
City:	State:		Zip:		
Phone:					
2nd Mortgage CO:		Loan 2 #:			
Address:					
City:	State:		Zip:		
Phone:					
Additional lienholders:					
Homeowner's association? Yes No		Contact name:			
Phone:		Mandatory? Yes No			
Approval required?					
Payment period: Yearly Monthly	Quarte	rly Semi-annual Other			
Dues:	Last Paid:				
Homeowner's warranty? Yes No		Fee:			
Home warranty comp:		Charge to:			
Comment:					