

REAL ESTATE CLOSING INFORMATION SHEET: Sellers Realtor

Please complete and fax back to B. Faith Martzin, PC, 864/751.6369 (fax) as soon as possible or email to fmartzin@martzinlaw.com.

PROPERTY Selling: _____ TMS _____
Lot: _____ Subdivision: _____ Section: _____ County: _____
Anticipated closing date: _____ Recording information: Deed Book _____ Page _____

SURVEY Is there a recorded survey? _____ Book _____ Page _____
Have any **repairs** been done on the house within the last 90 days or are any anticipated? _____
If so, please describe and list repairmen: _____
***I will need a paid receipt for all repairs.*

REALTORS

Selling Agent: _____ Company: _____ Ph: _____
Address: _____ FAX: _____ Other ph: _____

Commission: _____ % Other: _____
Listing Agent: _____ Company: _____ Ph: _____
Address: _____ FAX: _____ Other ph: _____

Commission: _____ % Other: _____

Deposit: Amount: \$ _____ Who is holding it? _____ Deposit will be brought to closing or retained.

SELLER: _____ SSN: _____ (Ph) _____
SPOUSE: _____ SSN: _____ (Cell) _____
Current Address: _____ (Email) _____
Forwarding Address: _____

EXISTING LIENS

*1st Mortgage: _____ () _____
*Address: _____ Fax _____
*Loan Number _____ Contact _____
Recording data: Date of lien _____ Mtg. Book _____ Page _____
Payoff: \$ _____ Good until _____ Per diem \$ _____

*2nd Mortgage: _____ () _____
*Address: _____ Fax _____
*Loan Number _____ Contact _____
Recording data: Date of lien _____ Mtg. Book _____ Page _____
Payoff: \$ _____ Good until _____ Per diem \$ _____

TERMITE LETTER: Required by contract? _____
Date ordered: _____ From: _____
Date to be delivered: _____ Who ordered: _____
Cost? _____ Has it been paid? _____
Any repairs to be made? _____ What? _____
Cost of repairs? _____ Who pays? _____

HOMEOWNERS ASSOCIATION: _____ Annual dues: \$ _____
Contact: _____ (Email) _____

TITLE INSURANCE: Is there a current policy? _____ If yes, please attach a copy.

OTHER: _____