

INSTRUCTIONS FOR SELLER INFORMATION FORM

Please complete all sections of the Seller Information Form. If an item is not applicable, please write N/A in the appropriate blank.

It is imperative that you provide complete information for current mortgages, including account number(s) and mortgage company phone number(s). When completing the section for Seller's SS#, please provide ONLY the last 4 digits of your social security number UNLESS you currently have a mortgage with Citi Mortgage, in which case, we'll need the last 6 digits. This information is necessary to allow us to order payoffs.

In the section "Commission Payable on this Transaction" please provide the percentage commission payable to the Seller's and Buyer's agents.

Please provide contact information for any homeowner's association. If you make payments to a management company instead of directly to the homeowner's association, please provide contact information for the company.

Please note any special requests in the area provided. These include powers of attorney, requests for a mail away closing, notification of a 1031 exchange.

There is also attached a Mortgage Payoff Authorization. Please complete one form for each mortgage or home equity line you currently have. Please provide all information requested and hand-sign the authorization. MOST LENDERS WILL NOT ACCEPT PAYOFF AUTHORIZATIONS THAT HAVE BEEN SIGNED ELECTRONICALLY.

Once all forms are complete, return to Morgan Poplin at morgan@forquerlaw.com or via fax to (704) 498-4878



ROBERT FORQUER

ATTORNEY AND COUNSELOR AT LAW

110 MATTHEWS STATION ST., STE 1E MATTHEWS, NC 28105. TELEPHONE 704.360.5175

SELLER INFORMATION FORM

FROM: Mark D. Lattimore

Return To: morgan@legaledgecharlotte.com

THIS OFFICE WILL BE THE CLOSING ATTORNEY FOR THE PURCHASE OF THE BELOW REFERENCED PROPERTY. PLEASE ASSIST US IN A SUCCESSFUL AND SMOOTH CLOSING BY PROVIDING US WITH THE FOLLOWING INFORMATION AS SOON AS POSSIBLE.

BUYER NAME:
PROPERTY ADDRESS:
AGENT FIRM:
AGENT NAME:
AGENT EMAIL:
AGENT PHONE NUMBER:
CLOSING LOCATION:
ANTICIPATED CLOSING DATE:

SELLER INFORMATION

Please provide only the last 6 digits of your social security number

SELLER ONE NAME (AS SHOWN ON DEED):
SELLER ONE SSN:
SELLER ONE MARITAL STATUS:
SELLER ONE PHONE NUMBER:
SELLER ONE EMAIL:

SELLER TWO NAME:
SELLER TWO SSN:
SELLER TWO MARITAL STATUS:
SELLER TWO PHONE NUMBER:
SELLER TWO EMAIL:
SELLER'S FORWARDING ADDRESS:

The property I am selling is/was: ____ my primary residence, or ____ not my primary residence.

EXISTING LOAN INFORMATION

1st MORTGAGE COMPANY:

LOAN NUMBER:

LENDER PHONE NUMBER:

2nd MORTGAGE COMPANY:

LOAN NUMBER:

LENDER PHONE NUMBER:

IS THE COMMISSION PAYABLE UPON THIS TRANSACTION? (Y/N):

HOME OWNERS ASSOCIATION INFORMATION

MANAGEMENT COMPANY:

MANAGEMENT PHONE NO.:

WILL YOU BE ATTENDING THE CLOSING?

YES

NO*

*If you will NOT be attending closing, will you require a PAYOFF or a MAILAWAY?

ADDITIONAL INFORMATION:

If this office will NOT be preparing these documents, please include the following information:

ATTORNEY'S NAME:

ATTORNEY'S PHONE NUMBER:

SPECIAL REQUESTS: