

Seller last name: _____ Buyer last name: _____

Address of home: _____ City: _____, Fl Zip: _____

Seller-1 name: _____ SSN: _____

Phone number: _____ Email: _____

Seller-2 name: _____ SSN: _____

Phone number: _____ Email: _____

Sellers Marital Status: Single - Married - Divorced - Widowed

If you have an attorney representing you please complete

Attorney name: _____ Phone: _____

Address: _____ Email: _____

Your forwarding
address when
you move:

Mortgage Information

Mortgage Company: _____ Account#: _____

Mailing Address: _____

Name on account if different than sellers: _____

2nd Mortgage Company: _____ Account#: _____

Mailing Address: _____

Name on account if different than sellers: _____

Utilities & HOA Info.

Community name: _____ Management Co: _____

Contact Name: _____ Phone: _____ Email: _____

Water bill is paid to: _____ Account#: _____

Phone number: _____

This is authorization to my lender, Attorney, water department and Homeowners Association to cooperate and provide any and all information about my account to the requesting title company.

Seller: _____ Date: _____

Seller: _____ Date: _____