

BUYER INFORMATION FORM

	FORM COMPLETELY AND RETURN TO OUR OFFICE AT YOU ENIENCE. ALL INFORMATION IS KEPT CONFIDENTIAL.
Please return to us via fax at 407-982-2587 OR via e-mail to closings@legalcounselpa.com	
1. Buyer Name:	Buyer Name:
Phone Number: ()	Phone Number: ()
E-Mail Address:	E-Mail Address:
2. Buyer's Mailing Address <u>afte</u>	r closing:
3. Buyer's Vesting to be written o	on Deed . Please print your name(s) exactly as you wish it to appear on the dee
4. Will you be present for closing	g?
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5. Please mark the appropriate M Husband and Wife	MARITAL STATUS box: ☐ A Married Man
5. Please mark the appropriate M Husband and Wife A Single Man	MARITAL STATUS box:
5. Please mark the appropriate M Husband and Wife A Single Man	AARITAL STATUS box: A Married Man A Married Woman
5. Please mark the appropriate M Husband and Wife A Single Man A Single Woman	A Married Man A Married Woman Other:
5. Please mark the appropriate Man Husband and Wife A Single Man A Single Woman 6. Will this property be your hon	A Married Man A Married Woman Other: Mestead/primary residence? A Married Woman NO
5. Please mark the appropriate N Husband and Wife	MARITAL STATUS box: A Married Man A Married Woman Other: Mestead/primary residence? YES NO No



By signing below, you authorize Legal Counsel, PA to order a survey on your behalf. Should the contract cancel after the survey is ordered, you authorize Legal Counsel, PA to deduct the survey fee from the buyer's earnest deposit held in escrow.

X	X
Print Name:	Print Name: