

SELLER INFORMATION FORM

Property Address:			
roperty Address	 	 	

PLEASE FILL OUT THIS FORM COMPLETELY AND RETURN TO OUR OFFICE AT YOUR EARLIEST CONVENIENCE. ALL INFORMATION IS KEPT CONFIDENTIAL.

Please return to us via fax at 407-982	2-2587 OR via e-mail to closings@legalcounselpa.com	
1. Seller Name:	Seller Name:	
Phone Number: ()	Phone Number: ()	
E-Mail Address:		
SS # or TIN #:		
2. Seller's Mailing Address after closing:		
Are you married? YES NO f you are a married person residing in homestead prope		
nust join in signing the deed (please include spouse's in	aformation in Item #1 above).	
6. Do you have a prior survey you can provide to us	? \square YES (please send copy) \square NO	
5. Do you pay dues to an HOA or condo association	? YES (please provide contact info below) NO	
Association Name:	Phone Number #:	
E-Mail Address:	Management Company:	
	\square YES (please provide contact info below) \square NO	
Association Name:	Phone Number #:	
E-Mail Address:	Management Company:	
3. Do you have a mortgage on this property? \Box	YES (please complete attached payoff authorization) \square NO	
A. 1st Mortgage Bank:	Loan #:	
B. 2 nd Mortgage Bank:	Loan #:	



9. Do you have a prior owner's title i	nsurance policy for this property?	☐ YES (please send copy)	□ NO			
10. How would you like your proceed	s sent?	RANSFER (please complete atta	iched form			
11. Are you a US Citizen?	☐ NO (please note FIRPTA withho	lding may apply)				
12. Do you have a <u>valid</u> government issued photo ID? TYES (please send copy and indicate type below)						
☐ Driver's License ☐ State Identification Card ☐ US Passport ☐ Foreign Passport ☐ Military ID						