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Seller Agent Information Sheet				
Complete, sig	gn, and return t	o closin	gs@montgomeryandh	art.com
Subject Property Address:				
Is this property your primary residence? () Yes () No				
Full Name:		Social	Security #:	
Full Name:		Social	Security #:	
Phone #:		Email:		
Marital Status: () Single () Married () Separated () Divorced () Widowed				
Are you a US Citizen or permanent resident of the US? () Yes () No				
Would you like us to prepare the deed & other required documents? () Yes () No				
Will seller(s) attend closing? () Yes () No				
Forwarding Address after closing:				
Prior Title Insurance Company:				
Mortgage Information - Please list all mortgages even if there is a zero balance				
1 st Mortgage Holder: Account/Loan #:			Phone #:	
2 nd Mortgage Holder or HEL0 Account/Loan #:	DC:		Phone #:	
Total Realtor Commission:		%	() WIRE	() MAIL
To Listing Agent:	%		To Selling Agent:	

PLEASE EMAIL COMPLETED FORMS TO CLOSINGS@MONTGOMERYANDHART.COM AND ATTACH ANY INVOICES TO BE ADDED TO THE SETTLEMENT STATEMENT