



PURCHASE APPLICATION FORM

Applicant Type: ☐ Buyer Only ☐ Seller Only ☐ Dual Agency

Applicant Name: _____

Email: _____ Phone: _____

Today's Date: _____ Desired Closing Date: _____

Property Address: _____

City: _____ State: _____ Municipality: _____ County: _____

Sales Price: \$ _____ Mortgage Amount: \$ _____

Short Sale: Yes ☐ No ☐ Current Owners Policy Available: Yes ☐ No ☐

Block: _____ Lot: _____ Deed Book: _____ Page: _____

BUYER - BUYER ONLY & DUAL AGENCY

BUYER 1: Name: _____ SS#: _____ Phone: _____ Email: _____	BUYER 2: Name: _____ SS#: _____ Phone: _____ Email: _____
SELLING BROKER: Company: _____ Real Estate Agent: _____ Email: _____ Phone: _____	ATTORNEY INFORMATION: Company: _____ Attorney Name: _____ Email: _____ Phone: _____
MORTGAGEE/LENDER: Company: _____ Address: _____ Loan Officer Name: _____ Email: _____ Phone: _____ Processor Name: _____ Email: _____ Phone: _____	MORTGAGE BROKER (if applicable): Company: _____ Address: _____ Loan Officer Name: _____ Email: _____ Phone: _____ Processor Name: _____ Email: _____ Phone: _____

I/WE HEREBY AUTHORIZE YOU TO ORDER THE FOLLOWING (Please Check):

Title Insurance Policy: Yes ☐ No ☐ Policy Type: Basic ☐ Enhanced ☐ N/A ☐
Survey.....Yes ☐ No ☐ Well.....Yes ☐ No ☐
Septic.....Yes ☐ No ☐ Termite Inspection.....Yes ☐ No ☐

Buyer 1 Signature: _____ Buyer 2 Signature: _____

PLEASE PROVIDE A CONTRACT/AGREEMENT OF SALE

SELLER - SELLER ONLY & DUAL AGENCY

SELLER 1: Name: _____ SS#: _____ Phone: _____ Email: _____	SELLER 2: Name: _____ SS#: _____ Phone: _____ Email: _____
LISTING BROKER: Company: _____ Real Estate Agent: _____ Email: _____ Phone: _____	ATTORNEY INFORMATION: Company: _____ Attorney Name: _____ Email: _____ Phone: _____

BUYERS TITLE COMPANY INFORMATION (if applicable):

Company: _____ Contact: _____
Email: _____ Phone: _____

Is either Seller 62 years of age or older: Yes ☐ No ☐
Married: Yes ☐ No ☐ Date of Marriage: _____ Maiden name of Spouse: _____
Widowed: Yes ☐ No ☐ If former spouse is deceased, provide a copy of the death certificate
Divorced: Yes ☐ No ☐ Provide a copy of the Judgment of Divorce, including property settlement agreement

I/WE HEREBY AUTHORIZE YOU TO ORDER THE FOLLOWING (Please Check):

Deed: Yes ☐ No ☐ Association Dues Letter: Yes ☐ No ☐ (if yes) Association Name: _____

PAYOFFS (Please check all that apply):

<input type="checkbox"/> FIRST MORTGAGE: Company: _____ Acct #: _____ Phone: _____	<input type="checkbox"/> EQUITY LINE: Company: _____ Acct #: _____ Phone: _____
<input type="checkbox"/> SECOND MORTGAGE: Company: _____ Acct #: _____ Phone: _____	<input type="checkbox"/> SOLAR PANELS: Company: _____ Acct #: _____ Phone: _____

Seller 1 Signature: _____ Seller 2 Signature: _____