

SELLER QUESTIONNAIRE

FILE NUMBER:

Property Address:

SELLER(S):

Please indicate the marital status of all persons.

Name: _____ Marital Status: Single Married

SSN (EIN if Coporation): _____ **U.S. Citizen? YES NO

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** FIRPTA (Foreign Investment in Real Property Tax Act of 1980) has special requirements for non-US Citizens. We will be contacting you with details.

PLEASE NOTE: IF YOU ARE **HOLDING TITLE IN A COMPANY NAME**, PLEASE PROVIDE **(1) PROOF COMPANY IS IN GOOD STANDING WITH THE STATE, (2) COPY OF OPERATING AGREEMENT, (3) ARTICLES OF INCORPORATION, AND (4) A RESOLUTION AS TO WHO WILL BE AUTHORIZED TO SIGN ON BEHALF OF THE COMPANY.**

Your mailing address to appear on the closing documents:

CURRENT CONTACT INFORMATION:

OFFICE: Phone: _____ Fax: _____

HOME: Phone: _____ Fax: _____

Cell Phone: _____ E-mail: _____

Preferred Contact: Home Work Cell E-mail

In the event that the closing on your property is part of a 1031 exchange please check here and provide us with the name and address of your Intermediary.

Intermediary: _____ Contact Person: _____

Phone Number: _____

REQUEST FOR WIRE TRANSFER INSTRUCTIONS

Please **contact** your bank before completing this form. Our bank charges a return wire fee if complete wiring instructions are not provided.

Name: _____

Property Address: _____

Name of Bank: _____ Phone: _____

Address: _____

Account Number: _____ Account Holder: _____
(Name on Account)

Mailing Address: _____

Wire Transfer Routing Number: _____

ATTACH FURTHER INSTRUCTIONS, IF NECESSARY.

Seller Signature: _____ Seller Signature: _____

Date: _____ Date: _____



Payoff Department

Re: Our File Number:
Mortgagor:
Property Address:
Loan Number:

Dear Sir or Madam:

Please be advised we have been instructed to close title on the above captioned transaction and we require a written pay off letter from you for same.

We expect to close on or before _____ and your mortgage will be satisfied at that time.

Please provide the payoff amount good through the expected closing date as well as a per diem amount.

Please FAX the information to our office. Our fax number is 850-792-4703.

Thank you in advance for your cooperation. Please reference our file number in all correspondence.

Sincerely,

Escrow Officer

AUTHORIZATION

The undersigned hereby authorizes you to release payoff information to Rushing Law Firm, PLLC as requested above.

_____ Date: _____

Seller(s) Signature(s)