

CLOSING INFORMATION SHEET

PROPERTY ADDRESS	
Purchase Price:	
Apprasied Value:	
BUYER INFO	
Buyer 1 Name:	
Phone:	
Email:	
Current Mailing Address:	
Buyer 2 Name:	
Phone:	
Email:	
SELLER INFO	
Seller Name(s)	
Phone:	
Email:	
HOME INSPECTION	
Company Name:	
Contact Name:	
Address:	
Phone:	
NOTES	
New Construction: <input type="checkbox"/> Yes <input type="checkbox"/> No Year Built:	
Square Feet:	
Foundation: Stories:	
All Utilities On: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Occupied: <input type="checkbox"/> Yes <input type="checkbox"/> No	
TERMITE INSPECTION	
Company Name:	
Contact Name:	
Address:	
Phone:	
Email:	
ATTORNEY	
Attorney Co:	
Attorney Name:	
Contact Name:	
Address:	
Phone:	Fax:
Email:	
Notes:	

APPOINTMENTS			
	DATE:	TIME:	Confirmed
Offer Date:	_____	_____	
Binding Date:	_____	_____	
Last Day- Due Diligence:	_____	_____	
Home Inspection:	_____	_____	<input type="checkbox"/>
Builder Walk- Through:	_____	_____	<input type="checkbox"/>
Re- Inspection:	_____	_____	<input type="checkbox"/>
Final Walk Through:	_____	_____	<input type="checkbox"/>
Closing:	_____	_____	<input type="checkbox"/>
LENDERS			
Buyer Company Name:			
Contact Name:			
Address:			
Phone:		Fax:	
Email:			
<i>NOTES:</i>			
Seller Company Name:			
Contact Name:			
Address:			
Phone:		Fax:	
Email:			
<i>NOTES:</i>			
Loan Type Buyer:			
Loan Type Seller:			
AGENTS:			
<i>Buyer Agent:</i>			
Company:			
Phone:		Fax:	
Email:			
<i>Seller Agent:</i>			
Company:			
Phone:		Fax:	
Email:			
HOME WARRANTY			
Company			
Plan #:			
<i>Notes:</i>			
NOTES			