



# Investors Title Company

## SELLER INFORMATION LETTER

Please help me to better process your file for closing by completing the following information and returning this form to my attention via the e-mail or fax number listed above within 4 days.

Name of Sewer Co. \_\_\_\_\_ Phone: \_\_\_\_\_ Acct. #: \_\_\_\_\_  
Name of Water Co. \_\_\_\_\_ Phone: \_\_\_\_\_ Acct. #: \_\_\_\_\_

I pay a Neighborhood / Condo Assessment  YES OR  NO (please check one). If you answered yes, please complete the following:

Current Trustee Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address of Trustee \_\_\_\_\_  
Amount of Assessment: \$ \_\_\_\_\_ Assessment Period \_\_\_\_\_ thru \_\_\_\_\_  
Amt. of Special Assess. \$ \_\_\_\_\_ Assessment Period \_\_\_\_\_ thru \_\_\_\_\_

**NOTE: If there are additional assessments for this property – please include info by attaching a separate sheet if necessary.**

My Homeowner’s Insurance is  escrowed with my lender OR  paid directly by me. (check which applies).

Amount of Yearly Premium: \$ \_\_\_\_\_ Date Premium is Pd thru: \_\_\_\_\_

Loan Information: Please complete the following. If there are more than two open loans secured by the property please attach a separate sheet with the required information for each loan.

FIRST MORTGAGE : \_\_\_\_\_ (Lender Name)  
Lender Addr: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Loan Number: \_\_\_\_\_ Lender Phone # \_\_\_\_\_  
Are you making the mortgage payment for the month of closing?  YES OR  NO if so, When? \_\_\_\_\_

2<sup>nd</sup> MORTGAGE : \_\_\_\_\_ (Lender Name)  
Lender Addr: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Loan Number: \_\_\_\_\_ Lender Phone # \_\_\_\_\_  
Are you making the \_\_\_\_\_ mortgage payment?  YES OR  NO if so, When? \_\_\_\_\_

**Do you have a Home Improvement Loan/Home Equity Loan or any other loan to pay off at closing?**  YES OR  NO (check one).  
**If loan information for this loan is not already referenced above, please attach a separate sheet listing the same loan info.**

Are there any Tenants Occupying this Property?  YES OR  NO (check one). If there are tenants, we will need tenant information (tenant name(s) / Unit Number/ Monthly Rent / Rent Paid thru Date / Security Deposit(s). Please attach sheet with required information.

Are all Owners of the property U.S. Citizens?  YES OR  NO (check one). If no, please note that you will be required to provide your Resident Alien (Green) Card at Closing.

Will you be in town attending the closing?  **YES OR**  **NO** (check one). If you have checked NO, we will contact you to make arrangements to get documents to you in advance. Note: Some documents will need to be signed in the presence of a Notary.

Are you planning on using a Power of Attorney at closing?  **YES OR**  **NO** (check one). Note: If you are using an existing Power of attorney – you must provide a copy for review and if approved, the Original Document must be presented at closing for recording unless it has been previously recorded.

Do you need us to prepare a New Power of Attorney form for you for closing?  **YES OR**  **NO**. (check one). If you selected yes, we will contact you to make arrangements for the Power of Attorney.

Are you or your spouse, if applicable, planning on using a Marital Waiver at closing?  **YES OR**  **NO**. (check one). If you selected yes, we will contact you to make arrangements for the use of a Marital Waiver at closing. NOTE: If you are planning on using an existing Marital Waiver, you must provide a copy to us for review. If approved, the original must be presented at closing for recording unless it has been previously recorded.

Is your property held in a Trust?  **YES OR**  **NO** (check one).  
If yes, you will need to complete a Certification of Trust Form. Please contact our office and we will be happy to send you this form.

Is your property held in a Corporation Name or an LLC?  **YES OR**  **NO** (check one).  
If you answered yes, you will need to provide us with either a Corporation Resolution or in the event of an LLC, we will need to be provided with a copy of the Operating Agreement for review prior to closing.

Have you had any work performed on this property in the last 12 months?  **YES OR**  **NO** (check one).  
**If yes, you will be required to provide copies of paid receipts and lien waivers for review prior to closing. Please contact your Closer or Processor with any questions pertaining to these requirements.**

Have you been divorced in the last 10 years?  **YES OR**  **NO** (check one).  
If yes, complete where Divorce is filed: County: \_\_\_\_\_ State: \_\_\_\_\_ and please provide a copy of divorce decree and separation agreement for review prior to closing.

**This form may be used as authorization for obtaining payoff and tax/escrow information from your lender upon request and/or authorization for obtaining judgment or lien payoff / information from a lien holder. If your mortgage is a line of credit, this form will also serve as authorization to block the account from further draws. Please sign where indicated and provide your social security number(s) so we may obtain your mortgage payoff information. Please also furnish us with a telephone number where you may be contacted between the hours of 9:00 a.m. until 5:00 p.m.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Marital Status

\_\_\_\_\_  
Marital Status

\_\_\_\_\_  
Forwarding Address:

\_\_\_\_\_  
Forwarding Address:

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Contact Phone: \_\_\_\_\_  
Where I can be contacted between 9:00am -5:00pm

Contact Phone: \_\_\_\_\_  
Where I can be contacted between 9:00am -5:00pm

**NOTE: You will need a current Driver’s License at closing. If you want to have the proceeds wired to your account, please contact the Closer or Processor to make those arrangements. An additional fee will be charged at closing and documentation will need to be provided for this service.**