

FINANCE INFORMATION SHEET

Client Name:

File Number:

Please complete the applicable information:

1. We/I plan to finance with:

Lender: _____

Contact Person: _____

Phone #: _____

Fax #: _____

Will taxes and insurance be escrowed? Yes / No

2. The following loans/debts to be paid off at closing are:

*If possible, please supply us with a copy of your lender's last payment statement

Lender: _____

Address: _____

Phone #: _____

Loan #: _____

Approx. Principal Balance: _____

Date of Last Payment: _____

2nd Mortgage Lender: _____

Address: _____

Phone #: _____

Loan #: _____

Approx. Principal Balance: _____

Date of Last Payment: _____

3. We/I will: _____ personally attend the closing;
_____ not be present for closing and desire to close transaction by
Specific Power of Attorney (additional fee of \$125.00), (If Title is held in
the name of a Trust, we will not be able to close by Power of Attorney); or
_____ not be present for closing and desire to close by mail.