

**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: \_\_\_\_\_

2<sup>nd</sup> 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.