



Selling Agent Questionnaire

FILE NUMBER: _____

PROPERTY ADDRESS: _____

LENDER: _____

SELLING AGENT: _____

Office: _____

Mobile Number: _____

Fax: _____

Email: _____

SALES PRICE: _____

COMMISSION: _____ % BASED ON \$ _____

EARNEST MONEY DEPOSIT: \$ _____ Held by _____

BUYER'S NAME(S): _____

Social Security No: _____

Marital Status: _____ / *KY SPOUSE MUST ATTEND CLOSING!!*

If married, spouse's name: _____

Phone Number: _____

Will all Borrowers Spouses be attending the closing? YES / NO

If NO, does our attorney need to prepare a Power of Attorney (\$95.00)? YES / NO

If NO, please fax to us ASAP. We will need to review the POA document to be used at closing.

TERMITE INSPECTION DONE BY: _____

Paid for by: _____ / Amount \$ _____ / POC or COLLECT

HOME WARRANTY: \$ _____ Made Payable to: _____

Paid for by: BUYER / SELLER / POC or COLLECT

Does the Buyer wish to purchase an OWNER'S TITLE POLICY? YES / NO