

Buyer Information Sheet

Email: preclosing@parkwaytitle.com

Phone: 404-719-5155



IT IS IMPORTANT THAT ALL APPLICABLE INFORMATION BE FILLED IN COMPLETELY TO ENSURE A SMOOTH CLOSING.

PLEASE FEEL FREE TO CONTACT THIS OFFICE SHOULD YOU HAVE ANY QUESTIONS REGARDING THE ABOVE INFORMATION.

Property Address:

_____ Street Address

_____ City State Zip

Forwarding Address (if different from above)

_____ Street Address

_____ City State Zip

Buyer 1:

Name: _____
Social Security Number: ____ - ____ - ____
Contact Phone #: () ____ - ____
Email Address: _____

Buyer 2:

Name: _____
Social Security Number: ____ - ____ - ____
Contact Phone #: () ____ - ____
Email Address: _____

Will this be your: ___ Primary Residence ___ Vacation Home ___ Secondary Residence ___ Other

Other _____

Will you be purchasing this property in a name(s) other than that of an Individual(s)? ___ YES ___ NO

If not, how is the property currently vested?

Vesting: ___ Trust ___ Corporation ___ LLC ___ Estate ___ Trust ___ Other

Other: _____

Name of Trust/Corporation/LLC/Estate/Trust/Other: _____ EIN: _____

Authorized Signer(s)/Title: _____ Attending: ___ Yes ___ No

Authorized Signer(s)/Title: _____ Attending: ___ Yes ___ No

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Authorized Signer(s)/Title: _____

Attending: ___ Yes ___ No

Authorized Signer(s)/Title: _____

Attending: ___ Yes ___ No

Name of Trust/Corp/LLC/Estate/Trust/Other:

Trust EIN: _____

Authorized Signer(s)/Title: _____ Attending

Authorized Signer(s)/Title: _____ Attending

Authorized Signer(s)/Title: _____ Attending

Authorized Signer(s)/Title: _____ Attending

Has there been a change of name for any individual purchasing the property in recent months?
___ Yes ___ No

Please forward as applicable to: preclosing@parkwaytitle.com

- LLC Corp Docs: Operating Agreement/Articles of Organization, Secretary of State Filing, Corporate Resolution / Signing Authority
- Last Will and Testament (If existing)/Letters Testamentary/Letters of Administration/Death Certificate
- Full Copy of the Trust Documentation (a Trust Affidavit is not sufficient)
- Divorce Documentation
- Proof of Marriage Certificate / Name Change Order / Divorce Decree

This transaction will be: Cash Lender Owner Financing Other: _____
(If this is not cash, please provide the lender information below)

Lender Company Name: _____

Contact: _____

Contact Email: _____

Contact Phone: () _____ - _____

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Parkway Law Group recommends strongly that all parties should plan to attend closing in person but we understand that some situations fo make it difficult to addend and we want to work with you to accommodate these situations to the best of our ability

Will one or more borrower(s) be unable to attend closing?

No, I/We will come into the office to sign.

Yes, Please provide available options for non-attendance on a lender financed closing (Your point of contact will reach out to you with options and there are additional fees for non attendance transactions)

Will any individual not listed on the contract or on the loan be added to title following closing? Yes No
This must be lender approved. (additional fees apply)

Please forward a copy of a government issued photo ID for the individual being added to title to preclosing@parkwaytitle.com

Is there a Condo or Homeowners Association present for this property? Yes No

If so, please complete the below:

Name of Association: _____ Contact Email Address: _____
Management Company: _____ Contact Phone #: () _____ - _____
Website: _____

Please forward a copy of your most recent HOA statement to: preclosing@parkwaytitle.com

Is there an additional Master Condo or Homeowners Association present for this property? Yes No

If so, please complete the below:

Name of Association: _____ Contact Email Address: _____
Management Company: _____ Contact Phone #: () _____ - _____
Website: _____

Please forward a copy of your most recent HOA statement to: preclosing@parkwaytitle.com