



Buyer Information

Buyer 1

Full Name: _____
Last *First* *M.I.*

Address: _____
Street Address *Apartment/Unit #*

City *State* *ZIP Code*

Home Phone: _____ Alternate Phone: _____

Email _____

SSN or Gov't ID: _____

Birth Date: _____ Marital Status: _____

Spouse's Name: _____

Spouse's Contact Number _____ Spouse's email address _____

Buyer 2

Full Name: _____
Last *First* *M.I.*

Address: _____
Street Address *Apartment/Unit #*

City *State* *ZIP Code*

Home Phone: _____ Alternate Phone: _____

Email _____

SSN or Gov't ID: _____

Birth Date: _____ Marital Status: _____

Spouse's Name: _____

These forms are provided as a tool to assist in the "For Sale By Owner" transactions. Capital Abstract & Title does not represent the Buyer or Seller in any way.

Spouse's Contact Number _____ Spouse's email address _____

Lender Information

Bank/Mortgage Co _____ Loan Amount _____

Loan Officer _____ Type of Loan _____

Contact Number _____ Email address _____

Home Owner's Insurance

Company/Agent Name _____
Phone _____ *Fax* _____

***If property is being held in a Trust, a copy of the Trust will be needed
**Please provide Vesting of Title (Joint Tenants w/ Rights of Survivorship – Tenants in Common – Husband and Wife – A Married Person – A Single Person)