

Seller 1 Signature: \_

PURCHASE APPLICATION FORM Applicant Type: Buyer Only Seller Only Dual Agency Applicant Name: Email: Today's Date: Desired Closing Date:\_ Surety Branch Office: \_\_\_ Property Address: Surety Representative: City:\_\_\_\_\_ State: \_\_\_\_\_ Municipality: \_\_\_\_\_ **Nick Souder** \_\_County:\_\_\_ C: (856) 655-6937 O: (800) 908-4853 Ext. 1153 Mortgage Amount: \$ Sales Price: \$ Short Sale: Yes No Current Owners Policy Available: Yes No nsouder@mysurety.com mysurety.com/nicksouder Block: \_\_\_\_\_ Lot: \_\_\_\_ Deed Book: \_\_\_\_ Page: \_ **BUYER** - BUYER ONLY & DUAL AGENCY BUYER 2: **BUYER 1:** Name: \_\_\_\_ Name: SS#: \_\_\_\_\_ Phone: Phone: SS#: Email: Email: **SELLING BROKER:** ATTORNEY INFORMATION: Company: \_ Company: Attorney Name: \_\_\_\_\_ Real Estate Agent: Email: Phone: Phone: MORTGAGEE/LENDER: MORTGAGE BROKER (if applicable): Company: \_\_\_\_\_ Company: \_\_\_\_ Address: \_ Address: Loan Officer Name: \_\_\_ Loan Officer Name: \_\_\_ Email: Phone: Processor Name: \_\_\_\_ Processor Name: \_\_\_ Email: \_\_\_\_\_ Phone: Phone: Email: \_\_\_\_\_ I/WE HEREBY AUTHORIZE YOU TO ORDER THE FOLLOWING (Please Check): Title Insurance Policy: Yes No Policy Type: Basic Enhanced N/A Survey.....Yes No Well....Yes No Septic......Yes No Termite Inspection.....Yes No Buyer 1 Signature: \_\_\_\_\_ Buyer 2 Signature:

*PLEASE PROVIDE A CONTRACT/AGREEMENT OF SALE*	
SELLER - SELLER ONLY & DUAL AGENCY	
SELLER 1:	SELLER 2:
Name:	Name:
SS#: Phone:	SS#: Phone:
Email:	Email:
LISTING BROKER:	ATTORNEY INFORMATION:
Company:	Company:
Real Estate Agent:	Attorney Name:
Email: Phone:	Email: Phone:
BUYERS TITLE COMPANY INFORMATION (if applicable):  Company: Email:	Contact:Phone:
Is either Seller 62 years of age or older: Yes No Narried: Yes No Date of Marriage: Maiden name of Spouse: Midowed: Yes No If former spouse is deceased, provide a copy of the death certificate  Divorced: Yes No Provide a copy of the Judgment of Divorce, including property settlement agreement	
I/WE HEREBY AUTHORIZE YOU TO ORDER THE FOLLOWING (Please Check):	
Deed: Yes No Association Dues Letter: Yes No (if yes) Association Name:	
PAYOFFS (Please check all that apply):	
FIRST MORTGAGE:	EQUITY LINE:
Company:	Company:
Acct #:Phone:	Acct #:Phone:
SECOND MORTGAGE:	SOLAR PANELS:
Company:	Company:
Acct #:Phone:	Acct #:Phone:

\_\_ Seller 2 Signature: \_\_