National Reach with Local Service

SURETY™
RESIDENTIAL | COMMERCIAL | FORECLOSURE

# PURCHASE APPLICATION FORM

Applicant Type: ☐ Buyer Only ☐ Seller Only ☐ Dual Agency

Applicant Name: _____

Email: _____ Phone: _____

Surety Branch Office: _____

Surety Representative:

**Brian Bouchard**
C: (609) 351-4377
O: (800) 908-4853 Ext. 1388
bbouchard@mysurety.com
mysurety.com/brianbouchard

Today's Date: _____ Desired Closing Date: _____

Property Address: _____

City: _____ State: _____ Municipality: _____ County: _____

Sales Price: $ _____ Mortgage Amount: $ _____

Short Sale: Yes ☐ No ☐ Current Owners Policy Available: Yes ☐ No ☐

Block: _____ Lot: _____ Deed Book: _____ Page: _____

## BUYER - BUYER ONLY & DUAL AGENCY

**BUYER 1:**

Name: _____

SS#: _____ Phone: _____

Email: _____

**BUYER 2:**

Name: _____

SS#: _____ Phone: _____

Email: _____

**SELLING BROKER:**

Company: _____

Real Estate Agent: _____

Email: _____ Phone: _____

**ATTORNEY INFORMATION:**

Company: _____

Attorney Name: _____

Email: _____ Phone: _____

**MORTGAGEE/LENDER:**

Company: _____

Address: _____

Loan Officer Name: _____

Email: _____ Phone: _____

Processor Name: _____

Email: _____ Phone: _____

**MORTGAGE BROKER** (if applicable)**:**

Company: _____

Address: _____

Loan Officer Name: _____

Email: _____ Phone: _____

Processor Name: _____

Email: _____ Phone: _____

**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:**

Name: _____

SS#: _____ Phone: _____

Email: _____

**SELLER 2:**

Name: _____

SS#: _____ Phone: _____

Email: _____

**LISTING BROKER:**

Company: _____

Real Estate Agent: _____

Email: _____ Phone: _____

**ATTORNEY INFORMATION:**

Company: _____

Attorney Name: _____

Email: _____ Phone: _____

**BUYERS TITLE COMPANY INFORMATION** (if applicable)**:**

Company: _____ Contact: _____

Email: _____ Phone: _____

Is either Seller 62 years of age or older: Yes ☐ No ☐

Married: Yes ☐ No ☐ Date of Marriage: _____ Maiden name of Spouse: _____

Widowed: 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:**

Company: _____

Acct #: _____ Phone: _____

☐ **EQUITY LINE:**

Company: _____

Acct #: _____ Phone: _____

☐ **SECOND MORTGAGE:**

Company: _____

Acct #: _____ Phone: _____

☐ **SOLAR PANELS:**

Company: _____

Acct #: _____ Phone: _____

Seller 1 Signature: _____ Seller 2 Signature: _____