

Company:

| National Reach with Local Service   |                        | U ICATION FORM  |
|---|------------------------|---|
| <b>SUBFTY</b>   |                        | YLICATION FORM  yer Only Seller Only Dual Agency                |
| RESIDENTIAL   COMMERCIAL   FORECLOSURE  |                        | yel Offiy Seller Offiy Dual Agency                              |
|   |                        | Phone:  |
| Surety Branch Office:   | Today's Date:          | Desired Closing Date:   |
| Surety Representative:  | Property Address:      |   |
| Emily Bartlett  | City:State             | e: Municipality: County:  |
| C: (732) 547-2242<br>O: (800) 908-4853 Ext. 3704  | Sales Price: \$        | Mortgage Amount: \$  Current Owners Policy Available: Yes No No |
| ebartlett@mysurety.com<br>mysurety.com/emilybartlett  |                        |   |
| gaa.agaagaagaaaa  | BIOCK:                 | Lot: Page:  |
|   |                        |   |
|   | <b>BUYER</b> - BUYER   | ONLY & DUAL AGENCY  |
| BUYER 1:  |                        | BUYER 2:  |
| Name:   |                        | Name:   |
| SS#: Ph   | none:                  | SS#: Phone:   |
| Email:  |                        | Email:  |
| SELLING BROKER:   |                        | ATTORNEY INFORMATION:   |
| Company:  |                        | Company:  |
| Real Estate Agent:  |                        | Attorney Name:  |
| Email:Ph  | ione:                  | Email: Phone:   |
| MORTGAGEE/LENDER:   |                        | MORTGAGE BROKER (if applicable):                                |
| Company:  |                        | Company:  |
| <u>'</u>  |                        | Address:  |
| Loan Officer Name: Ph   | none:                  | Loan Officer Name: Phone:                                       |
| Processor Name:   |                        | Processor Name:   |
| Email: Ph   | none:                  | Email: Phone:   |
| Survey  | Policy: Yes            | = = =   |
|   |                        |   |
| Buyer 1 Signature: Buyer 2 Signature:   |                        |   |
| •   | PLEASE PROVIDE A CON   | ITRACT/AGREEMENT OF SALE*                                       |
|   | SELLER - SELLER        | R ONLY & DUAL AGENCY  |
| SELLER 1:   |                        | SELLER 2:   |
| Name:   |                        | Name:   |
| SS#: Ph   | one:                   | SS#: Phone:   |
| Email:  |                        | Email:  |
| LISTING BROKER:   |                        | ATTORNEY INFORMATION:   |
| Company:  |                        |   |
| Real Estate Agent:  |                        | Attorney Name:  |
| Email:Ph  | one:                   | Email: Phone:   |
| BUYERS TITLE COMPANY INFORM   | ATION (if applicable): |   |
| Company:  |                        |   |
| Email:  |                        | Phone:  |
| Is either Seller 62 years of age  | or older: Yes No       |   |
| Married: Yes 🔲 No 🔲 Dat   | e 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        | e check all that apply):  |
| FIRST MORTGAGE:   |                        | EQUITY LINE:  |
| Company:  | Phone:                 | _ Company:<br>Acct #: Phone:                                    |
| SECOND MORTGAGE:  |                        | SOLAR PANELS:   |
|   |                        |   |

\_Phone: \_ \_Phone: \_\_ Acct #: \_\_ Acct #: \_\_\_\_ Seller 1 Signature: \_ Seller 2 Signature: \_

Company: \_\_\_\_