

Central TITLE

APPOINTMENT CHECKLIST

INFORMATION NEEDED FOR ALL SELLERS INVOLVED IN TRANSACTION.

SELLER(S)

Legal Name on DL: _____

Current Mailing Address: _____

Phone: _____ Email: _____

MARITAL HISTORY SINCE ACQUISITION OF PROPERTY

Marriage? Yes No If yes, spouse's name: _____ Date of Marriage: _____

Did spouse live on property? Yes No If yes, include on contract.

Divorce? Yes No If yes, County/State: _____ Date of Divorce: _____

Death? Yes No If yes, need copy of Death Certificate.

Is there a Will? Yes No If yes, was it probated? Yes No

POWER OF ATTORNEY

Yes No If yes, please provide original.

Is Allegiance Title going to prepare? Yes No

BANKRUPTCY

Yes No If yes, County/State: _____ Date: _____

PARTY TO ANY LAWSUIT

Yes No If yes, provide details: _____

MORTGAGE INFORMATION

Lender's Name: _____ Phone Number: _____

Loan Number: _____ Last four digits of SSN's: _____

Delinquent on Payments: Yes No If yes, how far behind: _____

EXISTING SURVEY

Yes No If yes, supply notarized T47 Legible: Yes No

Any changes: Yes No If yes, describe changes: _____

LEASE(S) IN PLACE: Yes No FIXTURE LEASE(S): Yes No SOLAR PANELS: Yes NO

MINERAL LEASE: Yes No OTHER: Yes No If yes, explain: _____

HOME OWNERS ASSOCIATION? Yes No If yes, name of association: _____

Current? Yes No Dues \$ _____ Assessed

Resale Cert Fee \$ _____ (Fee must be paid in advance) Transfer Fee \$ _____ (negotiated on contract)

CITIZENSHIP

US Citizen? Yes No Resident Alien/Green Card Yes No None of the Above

CLOSING WILL BE

Local or Mail out to: _____

Visit www.centraltitle.com to locate an office near you!