

ASSOCIATED TITLE & CLOSING SERVICES AGENCY, INC
205 HARRISON STREET
IRONWOOD, MI 49938
 906-932-6340 / 906-932-4350
 AssocTitle.net
 brancy@associtle.net

CLOSING INFORMATION CHECKLIST

TITLE COMMITMENT NUMBER: _____

REALTOR: _____ CLOSING DATE: _____

TIME: _____ PLACE: _____

LISTING AGENT: _____ SELLING AGENT: _____

SALES PRICE: _____ EARNEST \$: _____ COMM. (% OR \$): _____

SPLIT AGENT'S CHECKS AT CLOSE? yes ___ no ___

PROPERTY ADDRESS: _____

BUYER'S LENDER INFO/CONTACT: _____

SELLER INFO
NAME: _____
MAILING ADDRESS: _____
MAILING ADDRESS: (After Closing): _____
PHONE NO: _____
FAX: _____
SS# (for information reporting of a sale): _____
ATTORNEY'S INFO: _____
MARITAL STATUS: _____
PRIMARY RESIDENCE? yes ___ no ___
Will Seller Be Present at Close? yes ___ no ___

BUYER INFO
NAME: _____
MAILING ADDRESS: _____
MAILING ADDRESS: (After Closing): _____
PHONE NO: _____
FAX: _____
SS# (for homestead forms): _____
TAKING TITLE AS: _____
ATTORNEY'S INFO: _____
MARITAL STATUS: _____
TO BE PRIMARY RESIDENCE? yes ___ no ___
Will Buyer Be Present at Close? yes ___ no ___

ARE BUYER & SELLER RELATED? YES / NO IF YES, HOW? _____

ADDITIONAL CHARGES: (i.e. Septic Inspection, Percolation Test, Survey)	Charge to Buyer/Seller
\$ _____ FOR: _____ TO: _____	<input type="checkbox"/> <input type="checkbox"/>
\$ _____ FOR: _____ TO: _____	<input type="checkbox"/> <input type="checkbox"/>
\$ _____ FOR: _____ TO: _____	<input type="checkbox"/> <input type="checkbox"/>

FUEL PRORATION? _____ GALLONS @ \$ _____

IF SELLERS HAVE A CURRENT MORTGAGE: Please include an authorization statement from the Seller so the bank can release information to Associated Title Services, Inc.

OTHER INSTRUCTIONS/ADDITIONAL NOTES: _____

PLEASE ATTACH A COPY OF THE FULLY EXECUTED PURCHASE AGREEMENT