

GOOSMANN ROSE COLVARD & CRAMER, P.A.

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Asheville, NC 28801
Phone: 828-258-0150 Fax: 828-258-1305
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LISTING AGENT / SELLER CHECKLIST

From: _____
Email: _____
Subject: _____
Seller(s): _____
Tentative Closing Date: _____

Thank you and we look forward to working with you and/or your Seller client.

IMPORTANT NOTE

- Due to notary requirements and potentially to satisfy the requirements of the United States Patriot Act, it is imperative that all parties bring a **VALID STATE-ISSUED DRIVERS LICENSE OR IDENTIFICATION OR GOVERNMENT-ISSUED PASSPORT** to closing or contact your closing paralegal regarding other satisfactory identification.

INFORMATION REQUEST

In the event we are preparing the Seller's documents for this sale or are only representing the Buyer in this transaction, we would appreciate you providing us with the following information in order to help expedite the transaction:

Seller's Home Telephone # _____ His Work and/or Cell # _____
Her Work and/or Cell # _____

Seller's E-Mail Address(es): _____

Seller's Forwarding Address: _____

Seller's Social Security Number(s): _____

Who will be preparing the Seller's closing documents? _____

Will the Seller be attending closing? Yes or No

If needed, who will act as Seller's Attorney in Fact? _____

If Power of Attorney already exists, a copy **MUST** be provided for review prior to closing.

What is the **Seller's Marital Status** Married, Unmarried, Divorced, Separated, Other: _____

PLEASE NOTE, if the Seller is married, both spouses must attend closing or provide satisfactory evidence that the spouse has legally released of any of his/her marital interest in the property. Unless you advise us otherwise, we will assume all the sellers and spouses will be coming to closing.

Is there an existing **Title Insurance Policy** for the property? Yes or No

If applicable, please provide the following information and a copy of the policy:

Name of Company: _____

Policy Number: _____

Is there a **Survey** of the subject property? Yes or No

If applicable, please fax or email a copy and provide an original to our office either via mail or hand delivery and provide the following information:

Has the Seller, or previous owner, made changes to the subject property since the survey? Yes or No

If not, will the Seller sign an affidavit at closing indicating that there have been **NO CHANGES** since the prior survey described above? Yes or No

Is there any **Manufactured Housing** located on the property (singlewide, doublewide, or other modular home)? Yes or No

If applicable, has a title been issued from the Department of Motor Vehicles for the home? Yes or No

If a title has been issued, do you have the original DMV title: Yes (please provide a copy) or No

If a title has been issued, is the title listed in the Seller's name: Yes or No

If a title has been issued, have you contacted the DMV to determine if the title has been retired? Yes or No

For each **Mortgage** on the property, provide the following information:

(1) Lender: _____ Loan Number: _____
Contact: _____ Phone Number: _____

(2) Lender: _____ Loan Number: _____
Contact: _____ Phone Number: _____

(3) Lender: _____ Loan Number: _____
Contact: _____ Phone Number: _____

(4) Lender: _____ Loan Number: _____
Contact: _____ Phone Number: _____

Is the **Termite Report** a Seller expense? Yes or No

Has this report been ordered? Yes or No

If it has been ordered, please provide the following:

The name of the Inspection Company _____

The amount to be collected at closing: \$ _____

Is there **Fuel Oil/Propane** to be measured on the property? Yes or No

Is a **Certificate of Occupancy** or similar inspection required prior to closing? Yes or No

If so, please fax a copy of the Certificate of Occupancy or other certification to our office **PRIOR** to closing.

If one is not provided, we will presume that you will be providing this to the Buyer(s) outside of closing.

Is the Seller performing any **Repairs** to the property prior to closing? Yes or No

If so, please provide details of the repairs: _____

Also, if any repair invoices are to be paid, reimbursed or otherwise, we will presume the same are being handled outside of closing unless you present invoices and details to us prior to closing for inclusion on the Settlement Statement.

Is the Seller providing a **Home Warranty**? Yes or No

Has this home warranty been ordered? Yes or No

If it has been ordered, please provide the following:

The name of the Home Warranty Company _____

The Confirmation/Policy Number: _____

The amount to be collected at closing: \$ _____

PLEASE NOTE, if we are not presented with a home warranty invoice, our office will presume that this home warranty is being ordered by you and settled outside of closing; or, if we are given a verbal amount to collect, you will be given a check to forward.

If this property is subject to **Homeowners Association and/or Road Maintenance Assessments**, please provide the name, email and telephone number of the Treasurer or other contact for that Association: _____

PLEASE NOTE, our office will prorate the association dues as if they have been paid pursuant to the information provided in the contract. If you have knowledge of delinquent association dues, please notify our office prior to closing. Also, many association treasurers work and are not available during office hours at their home telephone number. If so, it may be incumbent upon you to contact them or provide us their work number to obtain a written statement for your client from the Association that the dues are paid current. Please obtain this and provide it to our office prior to closing.

What is the **Real Estate Commission**?

Percentage to Selling Agent: _____

Percentage to Listing Agent: _____

Do you wish for the listing commission to be split Yes or No

If "No," one check will be made to the listing agent at closing.

If "Yes," please provide details for the split: _____

The amount of the **Earnest Money or other Deposit** held by you is \$ _____

Will you be bringing the Deposit to closing? Yes or No

Please provide us with any charges for repairs or otherwise to be collected or reimbursed at closing and any other notes:

Please fax or email this information to **Goosmann Rose Colvard & Cramer, P.A.** at (828)258-1305 or info@grclaw.com

Thank you very much.

If you feel you and/or your client would benefit from reviewing their closing documents prior to closing, please call our office to set up a time for them to come in to do so.

DIRECT DIAL NOS:
George F. Goosmann, IV-350-3777
Veronica H. Colvard-350-3785
Laura Russell-350-3778
Cathy Robinson-350-3770
Sandra Noland-350-3779
Cynthia McCullers-350-3780
Donna Price 350-3797

John R. Rose-350-3766
Elizabeth L.M. Cramer-350-3789
Iris Bradley-350-3767
Elizabeth Balkcom-350-3765
Sharon Rathbone-350-3769
Alla Bruyaka-350-3773

