



PH: 954.368.8688
FAX: 954.368.8698
Closings@FirstTitleOfBroward.com
www.FirstTitleOfBroward.com

LISTING AGENT INFORMATION FORM

The purchaser(s) have selected our company ***FIRST TITLE OF BROWARD, INC*** to conduct the settlement in connection with the sale of your property. As settlement agents, we are responsible for paying off and releasing all existing liens against the property, notifying any homeowners association and paying any outstanding dues, conducting the settlement, and forwarding proof of this transaction to the Internal Service Revenue.

Please Provide The Information Below To Assist Us In Processing This Transaction.

Are we allow to contact your Client? YES [] NO []

Seller Name *

First name: _____ **Last Name:** _____

Social Security : _____ **EIN Numbers: Seller :** _____

Marital Status: Married [] Single [] Divorced [] Widowed [] **US Citizen:** [] Yes [] No

Sellers Email: _____ **Cell No:** _____

Phone No. Work: _____ **Phone No. Home:** _____

Forwarding address:: _____

Second Seller Name (if applicable)

First name: _____ **Last Name:** _____

Social Security: _____ **EIN Numbers: Purchaser:** _____

Marital Status: Married [] Single [] Divorced [] Widowed [] **US Citizen:** [] Yes [] No

Sellers Email: _____ **Cell No:** _____

Phone No. Work: _____ **Phone No. Home:** _____

Forwarding address: _____

- Notes:**
- 1. If Sellers are divorced must provide with Marital Settlement Agreement and Divorce Decree.**
 - 2. If Seller is a Trust, must provide copy of Trust**
 - 3. If Widow, will need to provide Death Certificate of Spouse.**



PH: 954.368.8688
FAX: 954.368.8698
Closings@FirstTitleOfBroward.com
www.FirstTitleOfBroward.com

1st Existing Lender Contact - Account Number: _____

Name: _____ Phone No. _____ Email: _____

2ND Existing Lender Contact - Account Number: _____

Name: _____ Phone No. _____ Email: _____

Homeowner Assoc. Mgmt. Co. YES _____ NO _____

Phone No. _____ Email: _____

Is there a 2nd HOA? YES _____ NO _____

Commission Breakdown: Listing % _____ Administrative/Processing Fees: \$ _____

Listing Agent Name: _____ License #: _____

Broker Company Name: _____ Broker ID: _____

Phone # _____ E/M: _____

REIMBURSE LISTING AGENT: YES _____ NO _____ \$ _____

Commission Breakdown: Selling % _____ Administrative/Processing Fees: \$ _____

Selling Agent Name: _____ License #: _____

Broker Company Name: _____ Broker ID: _____

Phone # _____ E/M: _____

Homeowner Warranty: YES _____ NO _____

HOA Docs \$ _____ Invoices: \$ _____

Notes - in case any additional information is required (i.e., 3rd purchaser, buying in a trust, etc.) _____

Below is contact information's should you have any questions please feel free to contact **FIRST TITLE OF BROWARD.**

Transaction Number: _____

Pre-Processor: _____ Phone #: _____ E/M: _____

Senior Processor : _____ Phone #: _____ E/M: _____

Attorney: _____ Phone #: _____ E/M: _____