

Foreclosure Buyer Information Form

This information is collected pursuant to federal law administered by the Financial Crimes Enforcement Network (FinCEN), a bureau of the U.S. Department of the Treasury. Information may be required to complete the transfer of the property.

Individual purchasing property

- 1. * Legal name _____
- 2. Alternate name _____
- 3. * Phone number _____
- 4. * Email address _____

Address: Principal place of business (if entity)

- 6. Address type _____
- 7. * Street address _____
(number, street, and apt. or suite no.)
- 8. * City _____

- 5. Foreign principal place of business with no U.S. location
- 9. * Country/Jurisdiction _____
- 10. * State/U.S. Territory _____
- 11. * ZIP/Foreign postal code _____

Identification

No identification

- 12. * Identification Number _____
- 13. Issuing jurisdiction (if foreign) _____

Transferee Trust or Transferee Entity

Person(s) associated with this Transferee:

- 14. * Person type Beneficial Owner Signing Individual Trustee Legal Entity

If Beneficial Owner

- 15. Check if true Parent/guardian information instead of minor child
- 16. Category (check all that apply)
 - a. Individual trustee
 - b. Individual with authority to dispose of assets
 - c. Sole permissible recipient of trust income or assets
 - d. Grantor or settlor with the right to revoke or withdraw assets
 - e. Beneficial owner of a legal entity or trust that is a trustee
 - f. Beneficial owner of a legal entity or trust with authority to dispose of assets
 - g. Beneficial owner of a legal entity or trust that is the sole permissible recipient of trust income or assets
 - h. Beneficial owner of legal entity or trust that is a grantor or settlor with the right to revoke or withdraw assets

- 17. Country/Jurisdiction of citizenship _____

If Signing Individual

- 18. * Authorization capacity _____ Other description _____
- 19. * Name of employer, principal, or partnership _____

Legal name | Alternate name (if entity) | Date of birth (if beneficial owner/signing individual)

- 20. * Last name or entity legal name _____
- 21. Alternate name _____
- 22. * First name _____
- 23. Middle name _____
- 24. Suffix _____
- 25. Date of birth _____

26. Foreign principal place of business with no U.S. location

Address: Principal place of business (if entity) | Residential (if beneficial owner/signing individual)

27. Address type _____

28. * Street address _____
(number, street, and apt. or suite no.)

29. * City _____

30. * Country/Jurisdiction _____

31. * State/U.S. Territory _____

32. * ZIP/Foreign postal code _____

Trustee Legal Entity

33. Date trust instrument executed _____

34. Are all transferees listed above? Yes No

If not, proceed to next page to add transferees.

Identification

No identification (if true for trustee entity only)

35. * Identification type _____

35. Issuing jurisdiction
(if foreign) _____

36. * Identification number _____

CERTIFICATION

I certify that the information provided above is true and correct and understand that this information is collected for potential reporting to the Financial Crimes Enforcement Network (FinCEN) as required by federal law.

Signature: _____ Date: ____ / ____ / ____

Printed Name: _____

Additional Transferee information:

Legal name | Alternate name (if entity) | Date of birth (if beneficial owner/signing individual)

1. * Last name or entity legal name _____
2. Alternate name _____
3. * First name _____
4. Middle name _____

5. Suffix _____
6. Date of birth _____

Identification

No identification (if true for trustee entity only)

7. * Identification type _____
8. * Identification number _____

9. Issuing jurisdiction (if foreign) _____

Additional Transferee information:

Legal name | Alternate name (if entity) | Date of birth (if beneficial owner/signing individual)

1. * Last name or entity legal name _____
2. Alternate name _____
3. * First name _____
4. Middle name _____

5. Suffix _____
6. Date of birth _____

Identification

No identification (if true for trustee entity only)

7. * Identification type _____
8. * Identification number _____

9. Issuing jurisdiction (if foreign) _____

Additional Transferee information:

Legal name | Alternate name (if entity) | Date of birth (if beneficial owner/signing individual)

1. * Last name or entity legal name _____
2. Alternate name _____
3. * First name _____
4. Middle name _____

5. Suffix _____
6. Date of birth _____

Identification

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8. * Identification number _____

9. Issuing jurisdiction (if foreign) _____