Vacation Owner Services Title Agency, LLC

625 40th Street, Unit 2 Brooklyn, NY 11232 Phone: 1 (760) 517-7870

OPENING ORDER WORKSHEET

CURRENT OWNER(S)/SELLER(S) INFORMATION:						
Seller 1:	Seller 2:					
(Show full le	gal name(s) as shown on government issued ID)					
Mailing address:						
Seller 1 Email:	Seller 2 Email:					
Primary Seller Phone Number:						
NEW OWNER(S)/BUYER(S) INFORMATION:						
Buyer 1:	Buyer 2:					
(Show full le	(Show full legal name(s) as shown on government issued ID)					
Mailing address:						
Buyer 1 Email:	Buyer 2 Email:					
Primary Buyer Phone Number:						
RESORT INFORMATION: Please refer to your Resort I	billing statement.					
Resort Name:	City: St	rate:				
Resort Management Company:	Phone:					
Resort Account Reference Number:	Unit Number:					
Service Requested (check): Timeshare Transfer With Consideration Timeshare Transfer without Consideration Title Search Title Insurance (Transfers with and without consideration require a title search & may require Title Insurance)						
ESCROW INFORMATION:	(National Manager and State and Stat	and may require this insulance,				
Purchase Price (write \$0 if without consideration): \$	If Seller has Received any funds from the Buy	er, list how much: \$				
All Closing Costs Paid By: □100% Seller □100% B	Buyer \Box 50%/50% split between Seller and Buye	r				
Buyer's First Year of Use:	Current Year HOA Dues Paid By: ☐100% Seller	□100% Buyer				
If the Seller has paid current Years HOA Dues, is Buye	er going to Reimburse the Seller? Yes	□ No				
Any Additional Information or purpose of transfer:						
ACKNOWLEDGMENT AND AGREEMENT:						
The undersigned Current Owner(s)/Seller(s) and New Owner(s)/Buyer(s) hereby acknowledge and confirm they have mutually agreed to sell/buy the above timeshare property as stated and Vacation Ownership Services is authorized and instructed to proceed with the escrow for the transfer of the above referenced property. Further, the Current Owner/Seller, hereby certifies the above referenced timeshare property will be available for occupancy in the year stated above and at each usage thereafter.						
Seller 1 Signature Date	Buyer 1 Signature	Date				
Seller 2 Signature Date	Buyer 2 Signature	Date				

Vacation Owner Services Title Agency, LLC Current Owner(s)/Seller(s) Resort Authorization

625 40th Street, Unit 2 Brooklyn, NY 11232 Phone: 1 (760) 517-7870

RESORT INFORMATION: Please refer to you	r Resort billing statement.	
Resort Name:		_
Resort City:	Resort State:	_
Resort Management Company:		_
Resort Phone:		
Resort Account Reference Number:		
Unit Number:		
Week/Interval:		
with any and all requests made by Vacatio information, property information and train) authorize(s) and instruct(s) the above stated Resort Managem n Ownership Services Title Agency, LLC or its employees for th nsfer of same to the New Owner(s)/Buyer(s), including but no ts, property description/verification, transfer requirements, right	ne release of all financial it limited to loan payoff,
Seller 1 Name:	_	
Seller 1 Signature	Date	
Seller 2 Name:	_	
Seller 2 Signature	 Date	

Vacation Owner Services Title Agency, LLC

625 40th Street, Unit 2 Brooklyn, NY 11232 Phone: 1 (760) 517-7870

NEW OWNER(S)/BUYER DEPOSIT INSTRUCTION

New Owner(s)/Buyer(s) hereby agree(s) to provide Vacation Ownership Services Title Agency, LLC with a non-refundable Escrow deposit of \$500.00. Vacation Ownership Services Title Agency, LLC cannot proceed without an account statement and required transfer documents from the applicable Timeshare Resort or its Management Company. In some instances, an upfront fee is required to be paid in advance of sending such statement and/or documents. Buyer(s) hereby authorize(s) and instruct(s) Vacation Ownership Services Title Agency, LLC to use funds on deposit for this escrow to pay any required, up-front fee(s) in order to obtain a current account statement and required transfer documents OR for any up-front title fees. The parties hereby understand and agree that said up-front fees are non-refundable. Any unused funds will be applied towards final closing costs. Should either party terminate the sale by written notification to Vacation Ownership Services Title Agency, LLC, or should the Property exercise their right of first refusal, Vacation Ownership Services Title Agency, LLC will keep any remaining funds to cover any fees they may incur.

The \$500.00 Escrow Deposit must be sent via check made payable to <u>Vacation Ownership Services Title Agency, LLC</u> or by ZELLE to <u>Les.Abeyta@VacationOwnershipServices.com</u>. All funds will be deposited into a Bank of America Account.

Les.Abeyta@Vac	cationOwnershipServices.co	<u>m</u> . All funds will be depos	sited into a Bank of America Account.	
The reference no	ote should be "".			
The funds should	d be mailed to the following	address within 5 days.		
	Vacation Ownership Servi Attn: Escrow Department 625 40 th Street, Unit 2 Brooklyn, NY 11232	= :		
Seller 1 Name: _		-	Buyer 1 Name:	_
Seller 1 Signatur	e	Date	Buyer 1 Signature	Date
Seller 2 Name: _		_	Buyer 2 Name:	_
Seller 2 Signatur	e	Date	Buyer 2 Signature	Date