



AFFILIATED PARTIES WORKSHEET

***=Required**

***Property Address:** _____

***MLS Number:** _____

***Listing Company:** _____

***Listing Agent(s):** _____

***Phone:** _____ **Phone:** _____ **Phone:** _____

***Seller's Name(s):** _____

Phone: _____ **Phone:** _____ **Phone:** _____

***Selling Company:** _____

***Selling Agent(s):** _____

***Phone:** _____ **Phone:** _____ **Phone:** _____

***Buyer's Name(s):** _____

Phone: _____ **Phone:** _____ **Phone:** _____

HOA: _____

HOA Website: _____

CIC: _____

***Earnest Money Check To:** _____

***Title Company:** _____

***Closing Agent(s):** _____

Phone: _____ **Phone:** _____ **Phone:** _____

***Lending Company:** _____

***Lending Agent(s):** _____

Phone: _____ **Phone:** _____ **Phone:** _____



Inspecting Company: _____

Inspector(s): _____

Phone: _____ **Phone:** _____ **Phone:** _____

Insurance Company: _____

Insurance Agent(s): _____

Phone: _____ **Phone:** _____ **Phone:** _____

Home Warranty Company: _____

Warranty Agent(s): _____

Phone: _____ **Phone:** _____ **Phone:** _____

Photo Company: _____

Photographer(s): _____

Phone: _____ **Phone:** _____ **Phone:** _____

Cleaning Company: _____

Cleaners(s): _____

Phone: _____ **Phone:** _____ **Phone:** _____

Additional Company: _____

Contact(s): _____

Phone: _____ **Phone:** _____ **Phone:** _____

Additional Company: _____

Contact(s): _____

Phone: _____ **Phone:** _____ **Phone:** _____