

## **BUYER INFORMATION**

- Please print or type your name as shown on your current government issued Photo ID.
- Please leave your SSN blank and call our office at (339) 234-9916 to provide.
- We will use this information to prepare your documents, which will be provided electronically and securely post-closing.

Buyer One	Buyer Two
Social Security Number (please leave blank)	Social Security Number (please leave blank)
Date of Birth	Date of Birth
Marital Status	Marital Status
Relationship between buyers: $\square$ Spouses	☐ Other (please describe)
Phone Number	Phone Number
Email Address	Email Address
Current address?	
Mailing address after closing?	
Manner in which the property will be used:	□ Principal Residence □ Second Home □ Investment
☐ Tenants in Common – If one owner dies, title aut☐ Sole Owner (If one buyer and no entity, then it is☐ In Trust: [choose one if applicable]	ne owner dies, title automatically passes to the surviving owner(s). Itomatically passes to their heirs. It assumed they will take title as a sole owner) I documents (including any amendments) with this form.
Will all buyers be present at closing? ☐ YES	□NO
It is essential that all parties be present. If this is not	