

# Robles Law, P.A.

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## REAL ESTATE QUESTIONNAIRE

INSTRUCTIONS: Answer all questions truthfully and completely. The information you enter in this questionnaire is confidential and protected by Attorney-Client Privilege.

Date: \_\_\_\_\_

### MATTER INFORMATION

\_\_\_\_\_ Real Estate Contract \_\_\_\_\_ Short Sale Transaction \_\_\_\_\_ Loan Modification

\_\_\_\_\_ Landlord/Tenant Lease \_\_\_\_\_ Landlord/Tenant Dispute \_\_\_\_\_ Other: \_\_\_\_\_

### CLIENT INFORMATION

Your Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

County of Residence: \_\_\_\_\_ You have lived at current address since: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Home Facsimile No: \_\_\_\_\_

Cell Phone No: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Soc. Sec.No: \_\_\_\_\_ Driver's License No: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ State/Country of Birth: \_\_\_\_\_

Other names you have been known by: \_\_\_\_\_

Spouse Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

County of Residence: \_\_\_\_\_ You have lived at current address since: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Home Facsimile No: \_\_\_\_\_

Cell Phone No: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Soc. Sec.No: \_\_\_\_\_ Driver's License No: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ State/Country of Birth: \_\_\_\_\_

Other names you have been known by: \_\_\_\_\_

EMPLOYER: \_\_\_\_\_

Work Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Work Phone: \_\_\_\_\_ Work Facsimile No: \_\_\_\_\_  
Work E-mail Address: \_\_\_\_\_  
How long have you worked at this employer? \_\_\_\_\_  
Position: \_\_\_\_\_ Salary/Earnings: \$ \_\_\_\_\_

EMPLOYER: \_\_\_\_\_  
Work Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Work Phone: \_\_\_\_\_ Work Facsimile No: \_\_\_\_\_  
Work E-mail Address: \_\_\_\_\_

How long have you worked at this employer? \_\_\_\_\_  
Position: \_\_\_\_\_ Salary/Earnings: \$ \_\_\_\_\_

Name of Emergency Contact, and Relation to You: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

How did you hear about our office: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**OTHER PARTY INFORMATION**

Name: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
County of Residence: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Facsimile No: \_\_\_\_\_  
Cell Phone No: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_

Are any of the other parties represented by an ATTORNEY in this matter? \_\_\_\_ Yes \_\_\_\_ No

***If YES, please answer the questions below:***

Name of Attorney/Firm: \_\_\_\_\_  
City where office located: \_\_\_\_\_ Phone: \_\_\_\_\_

*Indicate if this or any other attorney has:*

<i>Represented other party in other matters (besides this case)?</i>	Yes	No
<i>Provided advice or other services to you regarding this case?</i>	Yes	No
<i>Provided advice or other services to you regarding other matters?</i>	Yes	No
<i>Talked with you in person or by telephone regarding this case?</i>	Yes	No
<i>Sent letter or other written communications to you related to this case?</i>	Yes	No
<i>Served papers (by a sheriff or process server) upon you in this case?</i>	Yes	No

**REAL ESTATE IN QUESTION:**

**ADDRESS:** \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

COUNTY: \_\_\_\_\_ APPRX. VALUE: \_\_\_\_\_

HOW TITLED: \_\_\_\_\_

COMMERCIAL: YES: \_\_\_ NO: \_\_\_ RESIDENTIAL HOMESTEAD: YES: \_\_\_ NO: \_\_\_

**MORTGAGES AND LIENS: (if applicable)**

**MORTGAGOR:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

TERMS OF OBLIGATION: \_\_\_\_\_

CURRENT AMOUNT OWED: \_\_\_\_\_

**MORTGAGOR:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

TERMS OF OBLIGATION: \_\_\_\_\_

CURRENT AMOUNT OWED: \_\_\_\_\_

**OTHER LIEN HOLDERS AGAINST REAL ESTATE: (if applicable)**

**LIEN HOLDER:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

TERMS OF OBLIGATION: \_\_\_\_\_

CURRENT AMOUNT OWED: \_\_\_\_\_

**LIEN HOLDER:** \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

TERMS OF OBLIGATION: \_\_\_\_\_

CURRENT AMOUNT OWED: \_\_\_\_\_

**HOMEOWNER/CONDOMINIUM ASSOCIATIONS: (if applicable)**

**ASSOCIATION:** \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

TERMS OF OBLIGATION: \_\_\_\_\_

CURRENT AMOUNT OWED: \_\_\_\_\_

**ASSOCIATION:** \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

TERMS OF OBLIGATION: \_\_\_\_\_

CURRENT AMOUNT OWED: \_\_\_\_\_

Nature of case / reason for seeking consultation with our office: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Documents to Provide:**

- Purchase Contract or Lease (if applicable)
- Accounting (if applicable)
- Copy of Mortgage Statement (if applicable)
- Any and all correspondence from the other party
- Written Summary of communications between yourself and the other party