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Client Intake Form for Sale of Real Estate

Property Address: _____

Type of Heating: _____

Water: _____

Sewer or Septic: _____

Seller 1 Name: _____

Seller 1 Address: _____

Seller 1 Phone: _____

Seller 1 Email: _____

Seller 1 SSN: _____

Are you a Rhode Island Resident? Yes No

Seller 2 Name: _____

Seller 2 Address: _____

Seller 2 Phone: _____

Seller 2 Email: _____

Seller 2 SSN: _____

Are you a Rhode Island Resident? Yes No

Realtor Name and Contact Information (if applicable): _____

Are there any mortgages, liens or encumbrances on the property? Yes No

Please provide the following information for each mortgage and/or home equity line of credit:

Lender Name: _____

Lender Address: _____

Mortgage Account Number: _____

Outstanding Balance (approx.): _____

Lender Name: _____

Lender Address: _____

Mortgage Account Number: _____