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**SELLER QUESTIONNAIRE**

Please complete this questionnaire, sign and fax to (603) 218-6861

**Seller:**

**Buyer:**

**Property:**

**File No.**

1. **Should TITLE NEW HAMPSHIRE, LLC prepare the deed on your behalf? YES \_\_\_ NO \_\_\_**  
**If the answer is NO please provide the name and phone number of the attorney who will be preparing the deed.**

Attorney Name: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

2. **SELLER 1 NAME:** \_\_\_\_\_ **Soc Sec #** \_\_\_\_\_  
**Marital Status:** \_\_\_\_\_ **Spouse's Name:** \_\_\_\_\_  
**Phone Numbers:** Home \_\_\_\_\_ **Work:** \_\_\_\_\_ **Cell:** \_\_\_\_\_  
**E-mail Address:** \_\_\_\_\_ **Fax No.** \_\_\_\_\_  
**Current Address:** \_\_\_\_\_  
**Future Mailing Address:** \_\_\_\_\_

**SELLER 2 NAME:** \_\_\_\_\_ **Soc Sec #** \_\_\_\_\_  
**Marital Status:** \_\_\_\_\_ **Spouse's Name:** \_\_\_\_\_  
**Phone Numbers:** Home: \_\_\_\_\_ **Work:** \_\_\_\_\_ **Cell:** \_\_\_\_\_  
**E-mail Address:** \_\_\_\_\_ **Fax No.** \_\_\_\_\_  
**Current Address:** \_\_\_\_\_  
**Future Mailing Address:** \_\_\_\_\_

3. **Will all sellers be present at closing? YES / NO**

4. **Condominium Information/Mobile Home Park/Association Fees (if applicable)**

CONDOMINIUM ASSOCIATION \_\_\_\_\_ **Monthly Fee:** \$ \_\_\_\_\_  
MANAGEMENT COMPANY \_\_\_\_\_ **Phone #** \_\_\_\_\_

5. **CONTRACT INFORMATION**

**SALE PRICE \$** \_\_\_\_\_ **DEPOSIT \$** \_\_\_\_\_ **HELD BY:** \_\_\_\_\_  
**Listing Broker:** \_\_\_\_\_ **Commission %** \_\_\_\_\_ **Phone** \_\_\_\_\_  
**Buyers Protection Plan \$** \_\_\_\_\_ **To Whom** \_\_\_\_\_  
**CLOSING COSTS/POINTS PAID BY SELLER? If so \$** \_\_\_\_\_

6. **IS the property serviced by municipal WATER? YES / NO SEWER? YES / NO**

**Name of Water and Sewer company:** \_\_\_\_\_

7. **Property Tax Information:** Please include a copy of your most recent tax bill

**Correct Property Address:** \_\_\_\_\_  
**MAP/LOT:** \_\_\_\_\_ **Current Tax Amount \$** \_\_\_\_\_ **PAID? Y / N**

8. **What title company or attorney did the closing when you purchased this property?**

\_\_\_\_\_

9. **Owner's Title Insurance (if applicable):** If possible, please include a copy of your current policy. This policy is offered at the time of purchase and covers different aspects of that original title search. If you are unsure as to whether you opted for this coverage, please skip this item and we will contact you if needed.

Policy Number \_\_\_\_\_  
Title Insurance Company: \_\_\_\_\_

**MORTGAGE INFORMATION**

Effective on December 15, 1989, federally chartered savings and loan associations and savings banks were required to obtain an authorization in writing from a customer in order to disclose payoff figures (FHLBE Reg. 89-2350).

To receive payoff figures, Title New Hampshire, LLC must be in receipt of the mortgagors consent form listing each lender holding a mortgage secured by the above-referenced property address. Please be sure to list the addresses to which you currently make your payments.

Lender Name: \_\_\_\_\_  
Lender Address: \_\_\_\_\_  
Lender Phone #: \_\_\_\_\_ Account #: \_\_\_\_\_  
Type of Loan: \_\_\_\_\_ (i.e conventional, FHA, VA, Home Equity, commercial)

Lender Name: \_\_\_\_\_  
Lender Address: \_\_\_\_\_  
Lender Phone #: \_\_\_\_\_ Account #: \_\_\_\_\_  
Type of Loan: \_\_\_\_\_ (i.e conventional, FHA, VA, Home Equity, commercial)

I/We hereby authorize and consent the above-named Lender(s) to release information to Title New Hampshire, LLC regarding payoff figures for the above-referenced account(s) and for real estate tax and homeowners insurance information and understand that I/we may withdraw such authorization and consent at any time by notifying said institution in writing.

\_\_\_\_\_  
SS# \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
SS# \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_