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| --- | --- | --- | --- | --- | --- | --- |
| Closing Connect | | | | Seller Closing Information | | |
| Address Line 1 | | | | Address Line 2 | | |
| City | | | State  GA | | Zip | |
| What type of entity owns the property identified above? | | | | | | |
| Complete the following if the owner is identified as an individual. | | | | | | |
| First Name | | | Middle Name (Not Required) | | Last Name | |
| Home Phone | Mobile Phone | | Work Phone | Work Ext. | Social Security Number | |
| First Name | | | Middle Name (Not Required) | | Last Name | |
| Home Phone | Mobile Phone | | Work Phone | Work Ext. | Social Security Number | |
| First Name | | | Middle Name (Not Required) | | Last Name | |
| Home Phone | Mobile Phone | | Work Phone | Work Ext. | Social Security Number | |
| Complete the following if the owner is identified as an other legal entity. | | | | | | |
| Organization Name | | | | State of Incorporation | | |
| Address Line 1 | | | | Address Line 2 | | |
| City | | | State | | Zip | |
| Primary Contact First Name | | Primary Contact Last Name | | Phone Number | | Tax ID Number (EIN or SSN) |
| Signor’s First Name | | | Signor’s Middle Name (Not Required) | | Signor’s Last Name | |
| Signor’s Title | | | Will the primary signor attend the closing? | | Are there additional signor’s? | |
| Are there any other owners of the property? (If yes, identified the additional entity and the following information) | | | | | | |
| What type of entity owns the property identified above? | | | | | | |
| Complete the following if the owner is identified as an individual. | | | | | | |
| First Name | | | Middle Name (Not Required) | | Last Name | |
| Home Phone | Mobile Phone | | Work Phone | Work Ext. | Social Security Number | |
| First Name | | | Middle Name (Not Required) | | Last Name | |
| Home Phone | Mobile Phone | | Work Phone | Work Ext. | Social Security Number | |
| First Name | | | Middle Name (Not Required) | | Last Name | |
|  | | |  | |  | |
| Home Phone | Mobile Phone | | Work Phone | Work Ext. | Social Security Number | |
| Complete the following if the owner is identified as an other legal entity. | | | | | | |
| Organization Name | | | | State of Incorporation | | |
| Address Line 1 | | | | Address Line 2 | | |
| City | | | State | | Zip | |
| Primary Contact First Name | | Primary Contact Last Name | | Phone Number | | Tax ID Number (EIN or SSN) |
| Signor’s First Name | | | Signor’s Middle Name (Not Required) | | Signor’s Last Name | |
| Signor’s Title | | | Will the primary signor attend the closing? | | Are there additional signor’s? | |
| Are there any other owners of the property? (If yes, identified the additional entity and the following information) | | | | | | |
| What type of entity owns the property identified above? | | | | | | |
| Complete the following if the owner is identified as an individual. | | | | | | |
| First Name | | | Middle Name (Not Required) | | Last Name | |
| Home Phone | Mobile Phone | | Work Phone | Work Ext. | Social Security Number | |
| First Name | | | Middle Name (Not Required) | | Last Name | |
| Home Phone | Mobile Phone | | Work Phone | Work Ext. | Social Security Number | |
| First Name | | | Middle Name (Not Required) | | Last Name | |
| Home Phone | Mobile Phone | | Work Phone | Work Ext. | Social Security Number | |
| Complete the following if the owner is identified as an other legal entity. | | | | | | |
| Organization Name | | | | State of Incorporation | | |
| Address Line 1 | | | | Address Line 2 | | |
| City | | | State | | Zip | |
| Primary Contact First Name | | Primary Contact Last Name | | Phone Number | | Tax ID Number (EIN or SSN) |
| Signor’s First Name | | | Signor’s Middle Name (Not Required) | | Signor’s Last Name | |
|  | | |  | |  | |
| Signor’s Title | | | Will the primary signor attend the closing? | | Are there additional signor’s? | |
| Are there any other owners of the property? (If yes, identified the additional entity and the following information) | | | | | | |
| Are all the owners living? | | | | Are there any loans/mortgages against the property?  (If yes, complete the relevant information) | | |
| Mortgage Loan Lender Name | | | Loan Number | | Approximate Balance | |
| Phone Number | | Fax Number  (Not Required) | | Is this an equity line? | | Is this a short sale? |
| Are there any additional existing loans against the property? (If yes, complete the relevant information) | | | | | | |
| Mortgage Loan Lender Name | | | Loan Number | | Approximate Balance | |
| Phone Number | | Fax Number  (Not Required) | | Is this an equity line? | | Is this a short sale? |
| Are there any additional existing loans against the property? (If yes, complete the relevant information) | | | | | | |
| Mortgage Loan Lender Name | | | Loan Number | | Approximate Balance | |
| Phone Number | | Fax Number  (Not Required) | | Is this an equity line? | | Is this a short sale? |
| Are there any additional existing loans against the property? (If yes, complete the relevant information) | | | | | | |
| Are there any liens against you or the property other than the loans identified above? | | | | | | |
| Do you pay assessments (dues) to one or more homeowners or condominium associations? (If yes, complete the relevant information) | | | | | | |
| Community Association Name | | | | Is the association managed by a professional property management company? | | |
| If the association is managed by a professional property management company. | | | | | | |
| Management Company Name | | Phone Number | | Email | | Fax Number (Not Required) |
| Assessment Amount | | Frequency of Payment | | Are any of the assessments past due? | | Are you aware of any pending special assessments against the property? |
| If you answered yes above, provide the information related to the pending special assessment. | | | | | | |

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| If the association is not managed by a professional property management company. | | | | | | | | |
| First Name | | | Last Name | | | Title | | |
| Email | | | Phone Number | | | Fax Number (Not Required) | | |
| Assessment Amount | Frequency of Payment | | | Are any of the assessments past due? | | | Are you aware of any pending special assessments against the property? | |
| If you answered yes above, provide the information related to the pending special assessment. | | | | | | | | |
| Are there any additional homeowners associated to which assessments are paid? | | | | | | | | |
| Community Association Name | | | | | Is the association managed by a professional property management company? | | | |
| If the association is managed by a professional property management company. | | | | | | | | |
| Management Company Name | | Phone Number | | | Email | | | Fax Number (Not Required) |
| Assessment Amount | | Frequency of Payment | | | Are any of the assessments past due? | | | Are you aware of any pending special assessments against the property? |
| If you answered yes above, provide the information related to the pending special assessment. | | | | | | | | |
| If the association is not managed by a professional property management company. | | | | | | | | |
| First Name | | | Last Name | | | Title | | |
| Email | | | Phone Number | | | Fax Number (Not Required) | | |
| Assessment Amount | Frequency of Payment | | | Are any of the assessments past due? | | | Are you aware of any pending special assessments against the property? | |
| If you answered yes above, provide the information related to the pending special assessment. | | | | | | | | |
| Are there any additional homeowners associated to which assessments are paid? | | | | | | | | |
| Name of Water Service Provider | | | Name of Electrical Service Provider | | | Name of Sewer Service Provider | | |
| Is any seller currently involved in a divorce? | | | Is any seller currently involved in a bankruptcy? | | | Is any seller working with a corporation relocation company? | | |
| Is a mobile home located on the property? | | | Are all the sellers U.S. citizens? | | | Are all the seller a resident of GA? | | |
| Are there any outstanding property tax appeals? | | | Are there any federal tax liens filed against the seller? | | | Are there any state tax liens filed against the seller? | | |
| Mailing Address 1 | | | Mailing Address 2 (Not Required) | | | City | | |
| State | | | | | Zip | | | |
| How are the proceeds going to be received? | | | | | | | | |
| If proceeds are going to be received through a Wire Transaction. | | | | | | | | |
| Bank Name | | | | | Name on Account | | | |
| Routing Number | | | | | Account Number | | | |
| Comments/Instructions | | | | | | | | |

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| **IMPORTANT INFORMATION ABOUT YOUR CLOSING**  **Funds required from you for closing (if any) must arrive in our escrow account prior to closing, via wire transfer. Typically, you must call or visit your bank to initiate a wire transfer. Transfers initiated through the online banking access most customers have are ACH transfers, which are not considered a wire transfer, and are not an acceptable method of transmitting funds to us.**  **The real estate industry has seen a substantial increase in fraud attempts recently that revolve around fraudulent emails sent to buyers and sellers directing them to send funds for closing to an unauthorized third party's account. As a result, please note that OUR WIRING INSTRUCTIONS WILL NOT CHANGE AND WILL ONLY BE ACCESSIBLE THROUGH THIS SITE. If you receive an email or a communication from anyone with revised wiring instructions, including an email that purports to come from your agent, or from anyone at Weissman, please disregard it and call us at 404-926-4659.**  **Please make sure you bring a government issued photo ID to the closing. Acceptable forms of ID might be a valid unexpired drivers license, other federal or state-issued photo ID, U.S. passport, or military ID card.** |