

DUAL AGENT

PROPERTY ADDRESS: 123 Test Street, Philadelphia, PA 19123	MLS#: MLS12345	AGENT: John Test Smith
CLOSING DATE:	TIME:	LOCATION:

INITIAL DOCUMENTATION	
<input type="checkbox"/> AOS <input type="checkbox"/> Check <input type="checkbox"/> SPD <input type="checkbox"/> PreQual/POF <input type="checkbox"/> SEC <input type="checkbox"/> Wire Notice <input type="checkbox"/> HW <input type="checkbox"/> Deed <input type="checkbox"/> Referral Form <input type="checkbox"/> RLBPHD <input type="checkbox"/> FYP Form <input type="checkbox"/> WN <input type="checkbox"/> DMN <input type="checkbox"/> CN <input type="checkbox"/> Dual Agency <input type="checkbox"/> KPSS ABA Form <input type="checkbox"/> BEC <input type="checkbox"/> BAC <input type="checkbox"/> KW Disclosure <input type="checkbox"/> CBC KW Addendum signed: <input type="checkbox"/> Buyer <input type="checkbox"/> Seller <input type="checkbox"/> Agent	

CONTRACT PROCESSING	
<input type="checkbox"/> File started <input type="checkbox"/> Submitted Contract Folder <input type="checkbox"/> Approved <input type="checkbox"/> Commission Submitted <input type="checkbox"/> Added to Pending Checklist <input type="checkbox"/> Date on Calendar <input type="checkbox"/> Tasks set up Intro & AOS Copy to: <input type="checkbox"/> Buyer <input type="checkbox"/> Bank <input type="checkbox"/> Attorney <input type="checkbox"/> Seller	

DEPOSITS & MORTGAGE	
EMD Due:	Amount:
Follow up on: <input type="checkbox"/> Deposit <input type="checkbox"/> Mortgage Application <input type="checkbox"/> Appraisal <input type="checkbox"/> 1st Deposit received <input type="checkbox"/> 2nd Deposit received	

INSPECTIONS & REPORTS	
<input type="checkbox"/> Inspection Instructions sent to Seller <input type="checkbox"/> Pass @ Gate <input type="checkbox"/> Home Inspection Scheduled <input type="checkbox"/> House & Septic Ready Inspection Types: <input type="checkbox"/> General <input type="checkbox"/> Termite <input type="checkbox"/> Radon <input type="checkbox"/> Water <input type="checkbox"/> Septic Inspection Date: Inspector: <input type="checkbox"/> Inspection Reports received <input type="checkbox"/> sent to Buyer <input type="checkbox"/> BRTI Prepared <input type="checkbox"/> sent to Seller <input type="checkbox"/> CIT Prepared <input type="checkbox"/> Sent <input type="checkbox"/> Signed	

RESALE CERTIFICATE & C/O	
Resale Certificate: <input type="checkbox"/> Order Resale Cert. <input type="checkbox"/> Request Payment from Seller <input type="checkbox"/> Check Sent <input type="checkbox"/> Received <input type="checkbox"/> Copy sent to Buyer <input type="checkbox"/> Title Co Receipt of Documents: <input type="checkbox"/> sent <input type="checkbox"/> Receipt of Documents signed C/O Req Payment: <input type="checkbox"/> Sent INSPECTION DATE: <input type="checkbox"/> Copy to Buyer	

APPRAISAL & MORTGAGE	
Mortgage Type:	
Appraisal: <input type="checkbox"/> Ordered <input type="checkbox"/> Scheduled <input type="checkbox"/> Value OK? Repairs: <input type="checkbox"/> Repairs Needed <input type="checkbox"/> No Repairs Needed <input type="checkbox"/> Completed <input type="checkbox"/> Notified Lender Mortgage Commitment Due: <input type="checkbox"/> Requested <input type="checkbox"/> Received	

WARRANTY, REPAIRS, & UTILITY INFO	
Utility Info: <input type="checkbox"/> Received <input type="checkbox"/> Sent Warranty: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Ordered <input type="checkbox"/> Invoice sent to Title Company Warranty Company: Test Warranty Company Warranty Cost: 550 Paid By: <input checked="" type="checkbox"/> Seller <input type="checkbox"/> Buyer BRTI repairs: <input type="checkbox"/> Repairs finished <input type="checkbox"/> request receipts <input type="checkbox"/> Receipts received and sent to Agent/Buyer	

CLOSING	
Seller attending: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Mailed Docs <input type="checkbox"/> Sign early at Title Office <input type="checkbox"/> Requested Escrow Check <input type="checkbox"/> Confirmed Receipt	

CLOSING DATE TRACKING	
Closing Date:	<input type="checkbox"/> Confirmed
<input type="checkbox"/> All Parties Notified <input type="checkbox"/> Extension Signed <input type="checkbox"/> Calendar Updated Closing Time Preferred:	

COMMISSION DETAILS	
Buyer's Agent %: 3	
Listing Agent %: 3	Seller Paid Commission:
Total Commission %: 6	Buyer Paid Commission:

BUYER
NAME: Buyer Test Client
ADDRESS: 100 Buyer Ave, Philadelphia, PA 19123
PHONE: 215-555-6789
EMAIL: buyer@example.com

SELLER
NAME: Seller Test Client
ADDRESS: 200 Seller St, Philadelphia, PA 19123
PHONE: 215-555-4321
EMAIL: seller@example.com

ATTORNEY
NAME: John Attorney
CONTACT:

AGENT INFORMATION
NAME: John Test Smith
PHONE:
EMAIL:

TITLE AGENT INFORMATION
NAME: Test Title Company
PHONE:
EMAIL:
<input type="checkbox"/> TITLE ORDERED <input checked="" type="checkbox"/> ROFR <input type="checkbox"/> TC INVOICE SENT

HOA INFORMATION	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
ASSOCIATION: Test HOA	RESALE EXPIRES:
EMAIL:	PHONE:
SELLER SENT PAYMENT ON:	
NAME: Seller Test Client	
CONTACT:	

RESALE CERTIFICATE RECEIVED	<input type="checkbox"/> RECEIVED
NOTES:	

CERTIFICATE OF OCCUPANCY	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
MUNICIPALITY: Philadelphia	
REQUESTED:	RECEIVED:
C/O INSPECTION ON:	

LENDER INFORMATION
NAME:
PHONE:
EMAIL:

INSPECTION DETAILS	
INSPECTOR:	
CONTINGENCY DATE:	INSPECTION DATE:

UTILITIES INFORMATION	
WATER TYPE:	SEWER TYPE:

REFERRAL INFORMATION	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
DUE TO: 5,000	25%

NOTES

QUICK REFERENCE
Contract Date:
Acceptance Date:
Price: 350,000
Seller's Assist: 5,000