

Seller's Signature:

<u>For</u>	City Use (	<u>Only</u>	
Date:	1		
Issued By	-		

REQUEST FOR STATEMENT OF OPEN ACCOUNTS				
THIS FORM MUST BE SUBMITTED WITH YOUR  APPLICATION FOR THE REAL ESTATE TRANSFER STAMP  Incomplete forms will be returned, which will cause a delay in the processing of your request.  Please remember, the Statement of Open Accounts is only valid through  *Note: This request must be received at least 7 business days prior to closing.				
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Permanent Real Estate Index No. (PIN): Date of Deed:				
Address of Property:				
Type of Property:  Single Family: Detached or Attached (i.e. Condo/Townhouse)  Commercial/Industrial Vacant Lot (Specify Type - Apartment Complex/Restaurant/Manufacturing/etc.)				
Type of Account				
Utility Account				
Misc. Receivable				
If property is a Restaurant, Hotel/Motel, or Fuel Station: Tax Due \$				
This is NOT the actual Account Statement; this is only a request for information.  IF YOU DO NOT RECEIVE A COMPLETED STATEMENT OF OPEN ACCOUNTS FROM THE FINANCE DEPARTMENT ONE DAY PRIOR TO CLOSING, PLEASE CONTACT US AT 630-420-4116.				
SELLER INFORMATION: (Please Print)				
Name				
Address				
City, State, Zip				

I affirm that I have the authority to sign this form either as the Seller or authorized representative of the seller