

# LANDMARK TITLE

4540 SOUTHSIDE BOULEVARD, SUITE 702, JACKSONVILLE, FLORIDA 32216  
TEL 904.998.9733 FAX 904.998.9736

REQUESTED BY COMPANY \_\_\_\_\_ PHONE \_\_\_\_\_  
CONTACT \_\_\_\_\_ FAX \_\_\_\_\_

PROPERTY ADDRESS \_\_\_\_\_ CLOSING DATE \_\_\_\_\_  
\_\_\_\_\_

## BUYER/BORROWER INFO

NAME _____	NAME _____
MARITAL STAT _____	MARITAL STAT _____
ADDRESS _____	ADDRESS _____
_____	_____
HOME PH _____	HOME PH _____
WORK PH _____	WORK PH _____
MOBILE PH _____	MOBILE PH _____
SOC SEC # _____	SOC SEC # _____

## SELLER INFO

NAME _____	NAME _____
FORWARDING _____	FORWARDING _____
ADDRESS _____	ADDRESS _____
_____	_____
HOME PH _____	HOME PH _____
WORK PH _____	WORK PH _____
MOBILE PH _____	MOBILE PH _____
SOC SEC # _____	SOC SEC # _____

## REALTOR INFO

LISTING	SELLING
COMPANY _____	COMPANY _____
AGENT _____	AGENT _____
OFFICE PH _____	OFFICE PH _____
MOBILE PH _____	MOBILE PH _____
FAX # _____	FAX # _____
TRANS FEE \$ _____ COMMISSION _____ %	TRANS FEE \$ _____ COMMISSION _____ %

## LENDER/BROKER INFO

COMPANY _____	OFFICE PH _____
CONTACT _____	MOBILE PH _____
LOAN # _____	FAX # _____

## PROCESSING

HOME OWNER'S ASSOCIATION?  NO  YES >> MGMT CO: \_\_\_\_\_

MAILAWAY TO:  BUYER(S)  SELLER(S) CONTACT \_\_\_\_\_

PHONE \_\_\_\_\_

COMPANY/PHONE \_\_\_\_\_

SURVEY ORDERED BY:  TITLE OFFICE  REALTOR  NOT REQUIRED \_\_\_\_\_

WDO ORDERED BY:  TITLE OFFICE  REALTOR  NOT REQUIRED \_\_\_\_\_

WARRANTY ORDERED BY:  TITLE OFFICE  REALTOR  NOT REQUIRED \_\_\_\_\_

DEPOSIT HELD BY: \_\_\_\_\_

HAZARD INS COMPANY \_\_\_\_\_ CONTACT \_\_\_\_\_ PHONE \_\_\_\_\_

FLOOD INS REQUIRED?  NO  YES

SPECIAL INSTRUCTIONS: \_\_\_\_\_

PLEASE ATTACH A COPY OF THE PURCHASE CONTRACT AND FAX TO 904-998-9736