



LISTING APPOINTMENT *Checklist*

MARITAL HISTORY SINCE ACQUISITION OF PROPERTY

- Marriage? No Yes - If yes, spouses name: _____ Date of Marriage ___/___/___
- Did spouse live in property? No Yes - If yes, include in contract.
- Divorce? No Yes - If yes, County/State _____ Date of Divorce ___/___/___
- Death? No Yes - If yes, need copy of Death Certificate.
- Is there a will? No Yes - If yes, was it probated? No Yes

HOW IS TITLE HELD?

- Trust, LLC, Corp. etc? No Yes - If yes, need copy of Trust Agreement or LLC/Corp. Documents.

BANKRUPTCY?

- No Yes - If yes, County/State _____ Date ___/___/___

PARTY TO ANY LAWSUIT?

- No Yes - If yes, please provide details _____

MORTGAGE INFO?

- Recent Statement? No Yes
- If no, need lenders name _____ Phone _____
- Loan Number _____ SS# _____
- Delinquent on Payments? No Yes - If yes, how far behind? _____

EXISTING SURVEY?

- No Yes - If yes, is it Legible? No Yes
- Any changes? No Yes - If yes, describe changes and sketch on another copy _____

OWNERS TITLE POLICY?

- No Yes

HOME OWNERS ASSOCIATION?

- No Yes - If yes, suggest calling HOA to get information on Resale Certificate and Transfer Fee Charge.
- Current? No Yes
- How often assessed? Yearly Quarterly Monthly

ADDRESSES?

- List of Addresses you have lived in the past 10 years.

REQUEST TO OPEN TITLE SIGNED?

- No Yes