

# Seller's Questionnaire

Please complete this form and return to us by fax, e-mail, or postal mail as soon as possible.

## Seller #1

1. Full Legal Name: \_\_\_\_\_

2. Marital Status (check one):  Single  
 Married to Seller #2  Married to someone else

3. Social Security Number: \_\_\_\_\_

4. Future Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Home Phone #: \_\_\_\_\_

6. Cell Phone #: \_\_\_\_\_

7. Work Phone #: \_\_\_\_\_

8. E-mail Address: \_\_\_\_\_  
\_\_\_\_\_

9. Is the sale property your primary residence?  
(check one):  Yes  No

10. Will you be attending the closing? (check one):  
 Yes  No (If No, contact our office immediately)

## Seller #2

1. Full Legal Name: \_\_\_\_\_

2. Marital Status (check one):  Single  
 Married to Seller #1  Married to someone else

3. Social Security Number: \_\_\_\_\_

4. Future Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Home Phone #: \_\_\_\_\_

6. Cell Phone #: \_\_\_\_\_

7. Work Phone #: \_\_\_\_\_

8. E-mail Address: \_\_\_\_\_  
\_\_\_\_\_

9. Is the sale property your primary residence?  
(check one):  Yes  No

10. Will you be attending the closing? (check one):  
 Yes  No (If No, contact our office immediately)

### Additional steps you must take:

- ✓ We will need your authorization to order payoff statements for the closing. Please complete our attached Payoff Authorization Form.
- ✓ Would you like Best Rates Title Company's attorney to prepare your deed for a fee of \$175.00? (check one):  
 Yes  
 No (If No, we require a copy of the proposed deed at least one (1) week before the closing, and will charge a fee to review the deed).
- ✓ Please provide copies of the latest bills you have received for taxes, wastewater, water, and mortgages as they apply to your property.

**\*Questionnaire continues on next page\***

## Property Information

1. Exact address of the property you are selling: \_\_\_\_\_

2. Purchase Price: \_\_\_\_\_ Verify deposit amount of buyer(s): \_\_\_\_\_

3. Are the real estate taxes paid to date? (check one):

Yes (If Yes, please forward your paid tax receipt)  No (If No, please forward the unpaid tax bill)

4. Please provide all current mortgage information related to this property.

### Mortgage #1

Lender's Name: \_\_\_\_\_ Account #: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Is this a home equity loan? (check one):  Yes  No

### Mortgage #2

Lender's Name: \_\_\_\_\_ Account #: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Is this a home equity loan? (check one):  Yes  No

### Mortgage #3

Lender's Name: \_\_\_\_\_ Account #: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Is this a home equity loan? (check one):  Yes  No

**\*If you have more than three mortgages on the property, please attach the information requested above on a separate sheet of paper.\***

## **\*Please take notice of these special situations:\***

### **\*For Condominiums:**

If the property is a condominium, it is your responsibility to order and provide us with the 6-D Certificate, which states the status of the condominium payments through the month of the date of closing.

**Condominium Management Company:** \_\_\_\_\_

**Telephone #:** \_\_\_\_\_ **Monthly Payment:** \_\_\_\_\_

### **\*For Property in a Trust:**

If the property is in a trust, we will need to prepare a Trustee Certificate at an additional fee.

### **When you have finished this questionnaire, please:**

- Fax to (603) 595-9899, or
- Scan and e-mail to [beststrateitle@gmail.com](mailto:beststrateitle@gmail.com), or
- Mail to:

Best Rates Title Company of NH, LLC  
374 Main Street  
Nashua, NH 03060



If you have questions, please call us at:  
(603) 595-8867

# Payoff Authorization

Property Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Borrowers Name(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**I/We, the undersigned, authorize Best Rates Title Company of NH, LLC to receive any payoff information with regards to the payoff of my/our present loan.**

Signature(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

