

**Residential Real Estate Seller Information Form**

| **Number of sellers:** | **Seller #1 (Primary Contact)** | **Seller #2** |
| --- | --- | --- |
| 1 [ ]  2 [ ]  Other [ ]  |       |       |
| First Name: |       |       |
| Middle Name: |       |       |
| Last Name: |       |       |
| Date of Birth:(dd/mmm/yyyy) |       |       |
| Occupation: |       |       |
| Home Phone No.:  |       |       |
| Cell Phone No.: |       |       |
| Business Phone No.: |       |       |
| Email Address:  |       |       |
| Home Address: |       |       |
| Marital Status: | [ ]  Legally Married [ ]  Common-law [ ]  Separated [ ]  I am not a Spouse (single, divorced, widowed) | [ ]  Legally Married [ ]  Common-law [ ]  Separated [ ]  I am not a Spouse (single, divorced, widowed) |
| How many residential units are there on the property? | [ ]  One [ ]  Two [ ]  More than two |
| Are there tenants currently occupying the property? | [ ]  Yes [ ]  No |
| Do you have pre-authorized payments setup for your: | Property Taxes: [ ]  Yes [ ]  No (included with mortgage payment)Condo Fees: [ ]  Yes [ ]  No(if applicable) |
| What is the relationship between the co-owners of the property (if applicable)? | [ ]  One owner[ ]  Spouses [ ]  Separated Spouses[ ]  Other:       |
| Do you have a mortgage on this property?If yes, who is your Lender?Your mortgage account number: | [ ]  Yes [ ]  No          Please send us a copy of a statement |
| Are there liens or other encumbrances registered against your property? | [ ]  Yes [ ]  NoTo Whom:      Amount:       |
| How is the property heated? | [ ]  Gas[ ]  Electricity[ ]  Oil/Fuel |
| Do you have evidence of your paid taxes? | Please forward a current tax bill to our office and proof payment. |
| Survey | Please also forward a copy a survey of the property, if one is available. |
| **For Condos only** |  |
| Who is your Property Management Company? | Name:       Phone:       |
| What are your monthly Common Fees? |      / month |
| Will you have paid the monthly condo fees for the month of closing by the closing date? | [ ]  Yes [ ]  No |

Please return completed form using an option below:

* Email to : OR
* Fax this form to: 905.276.2298 Attention:  OR
* Mail or drop form to:

Keyser Mason Ball, LLP

Attention:

3 Robert Speck Parkway

 Suite 900

 Mississauga, ON L4Z 2G5

Documents to Attach:

[ ]  Current Tax Bill;

[ ]  Mortgage Statement; and

[ ]  Void cheque for deposit after closing