

**The Law Offices of Lowry & Associates**  
**919/518-0783 (P) 919/518-8375 (F)**

**Seller's Information**

1. Seller's Agent: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Name/Address of Company: \_\_\_\_\_  
State License Numbers: Company: \_\_\_\_\_ Agent: \_\_\_\_\_
  
2. Seller Name(s): \_\_\_\_\_  
EIN#: \_\_\_\_\_ Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_ Email: \_\_\_\_\_  
  
Forwarding/Mailing Address: \_\_\_\_\_
  
3. Commissions: \_\_\_\_\_% Total: \_\_\_\_\_% to Listing Agent \_\_\_\_\_% to Selling Agent  
Marketing Fee: \_\_\_\_\_% To: \_\_\_\_\_  
Other Fees: \_\_\_\_\_ To: \_\_\_\_\_
  
4. Name of Current Mortgage Company: \_\_\_\_\_  
  
Customer Service Number: \_\_\_\_\_ Loan #: \_\_\_\_\_
  
5. Do you have a second mortgage or an Equity Line on your property? \_\_\_\_\_  
  
If so, name of Lender: \_\_\_\_\_  
  
Customer Service Number: \_\_\_\_\_ Loan #: \_\_\_\_\_
  
6. Do you have HOA dues? \_\_\_ Assessment \$ \_\_\_\_\_ Monthly \_\_\_ Annually \_\_\_ Other \_\_\_  
Association Management Company/Contact: \_\_\_\_\_ Phone: \_\_\_\_\_  
Is this property a condominium? \_\_\_\_\_
  
7. Are there any pending City/County Assessments against the property? \_\_\_\_\_
  
8. Would you like our office to prepare the Deed/Lien Waiver for you? \_\_\_\_\_ (fee of \$150.00)  
If so, who will sign the Deed? Name & Title: \_\_\_\_\_  
If no, a copy of the Deed/Lien will need to be faxed to our office prior to the closing date for review.  
  
If New Construction what is the assigned MLA#? \_\_\_\_\_
  
9. Will you attend the Closing? \_\_\_\_\_  
***IF NOT, PLEASE CONTACT OUR OFFICE TO DISCUSS SIGNING PROCESS.***
  
10. Who is your current title insurance company? \_\_\_\_\_ Policy #: \_\_\_\_\_  
(This information is usually found on your previous closing statement.)

**AUTHORIZATION TO RELEASE LOAN INFORMATION**

To Whom It May Concern:

Please be advised that the undersigned hereby authorizes) \_\_\_\_\_ the “Lender”) and any of its employees or agents to release any information concerning any loans or accounts we have with the Lender to The Law Offices of Lowry & Associates (the “Firm”), or any of its attorneys, paralegals, or other employees including, without limitation, any payoff information concerning any such loans or accounts we have with the Lender. **If any such loan is an equity line of credit/open ended/revolving account, we hereby direct that the account be frozen and blocked immediately,** and (i) **we direct the Lender to close the account once it has received the payoff amount,** and (ii) the Lender is authorized to follow any directions of the Firm necessary to freeze or block the account effective immediately, or terminate the account upon delivery of the payoff amount.

Account Number(s) [If known]: \_\_\_\_\_

Dated: \_\_\_\_\_

**BORROWER(S):**

Co. Name: \_\_\_\_\_

By/Title:: \_\_\_\_\_

Date: \_\_\_\_\_

**SELLER PROCEEDS DISBURSEMENT REQUEST**

We hereby acknowledge that the Closing Attorney is not authorized to disburse funds prior to the receipt of funds from the buyer's lender, the lender has given authorization to release funds, and all documents have been recorded at the County Register of Deeds office.

We hereby acknowledge that the Closing Attorney cannot guarantee a specific time funds will be available on the date of disbursement. If funds are not received prior to 3:00 p.m. on the day of closing, documents will not be recorded and funds will not be disbursed until the next business day.

We hereby acknowledge the Closing Attorney will overnight payoffs to all Lien Holders on title (i.e. Mortgages, Judgments, UCC filings and IRS Tax Liens).

**SELLER PROCEEDS FROM CLOSING WILL BE SENT VIA US MAIL UNLESS OTHERWISE NOTED BELOW**

**PLEASE INITIAL ONE:**

\_\_\_\_\_ US MAIL  
(If checks are lost in the mail, customer is responsible for a \$35.00 charge, per check, for stop payment and re-issuing the check)

Mail Proceeds to: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Overnight Courier Service for a fee of \$25.00

\_\_\_\_\_ Via Wire for a fee of \$25.00  
(please contact the Closing Attorney's office to provide your wiring information. Please also provide us with a contact number to reach you to verify wiring instructions at the time we wire the funds. **NOTE:** Due to the timing of the closing process and in setting up wires, we cannot promise to wire funds on the day of Closing. If we are unable to initiate a wire on the Closing Date, it will be initiated the next Business Day morning. If you are closing on another purchase with your proceeds on the same day as Closing, please let us know so that appropriate steps can be taken to better ensure that funds will be available for your Closing, subject to the availability of funding from the buyer and Buyer's lender): Contact Number for Closing Date: \_\_\_\_\_

\_\_\_\_\_ Pick Up Proceeds check when available at the Closing Attorney's office  
(please call ahead to verify proceeds are ready)

\_\_\_\_\_ Authorize the release of the proceeds check to our REALTOR

SELLER: \_\_\_\_\_

By: \_\_\_\_\_

Name/Title: \_\_\_\_\_

Date: \_\_\_\_\_