



TITLE 1ST

1160 E. Main Street
PO Box 36
Lebanon, OH 45036
Ph. 513-228-4141
Fax 513-228-4142

Pre-Closing Information Sheet

Seller Name(s): _____

Spouse's Name (if any): _____

Phone No.: _____ **Email:** _____

Forwarding Address: _____

SNN: _____ **Spouse SSN (if any):** _____

POA Needed? Yes No **Mail Away Documents?** Yes No

Agent Name: _____

Agent License No.: _____ **Agent NMLS ID:** _____

Firm/Broker: _____

Firm/Broker License No.: _____ **Firm/Broker NMLS ID:** _____

Phone No.: _____ **Email:** _____

Earnest Money: _____ **Realtor Commission:** _____

Mortgage Payoff Lender: _____ **Account No.:** _____

(See accompanying authorization form to be signed and filled out by seller)

HOA: Yes No **Company:** _____ **Phone No.:** _____

Seller Paid Costs: Yes No **Amount:** Yes No

- Please email completed form to Betsy@title1st.com or fax to 513-228-4142 •
- Please provide copy of Home Warranty invoice, if applicable •
- Please provide wiring instructions if proceeds are to be wired •