

BUYER INFORMATION FORM

Property Address: _

Please provide the information requested and return this form via fax or e-mail it to (603) 792-1908 or info@unitedtitlenh.com

If you do not have your home owner's insurance information at this time, please return the form. Note that we will need this information at least 5 days prior to the scheduled closing date.

About You:

Name	Name
Home Phone	Home Phone
Work Phone	Work Phone
Cell Phone	Cell Phone
E-Mail	E-Mail
Social Security Number	Social Security Number

Deed: Please indicate how the interest to the property should be conveyed to the Buyers on the Deed:

- _____ Two or more related or non-related persons Joint Tenants with Rights of Survivorship. This means that if one owner dies, title automatically passes to the surviving owner(s).
- Two or more related or non-related persons-Tenants in Common. Each person has an equal (or certain percentage of) ownership in the property and if one owner dies, his or her share will pass to their respective heirs.
- _____ Sole Owner; owned individually _____ Male _____ Female
- _____ Property will be held in a Trust. Please note-we will need to have the trust documents reviewed PRIOR to closing.

If none of these examples fit your situation, or if you have questions, please contact me.

Deed to be held in names of: Please PRINT clearly including First/Middle Initial/Last Name/Sr./Jr./I, II, III, etc.

(1)	SS#
(2)	SS#
(3)	SS#
(4)	SS#

Relationship (i.e., husband and wife, father and son, etc.)

Property Information:

- If this property has public water and /or sewer, you will need to contact the municipal offices to advise of the transfer of ownership.
- Will the property you are purchasing be your primary residence?
 Is this new construction?
 Are all buyer(s) attending the closing?
 Yes _____ No
 Yes _____ No

If **NO**, please contact our office immediately concerning your loan documents.