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DATE: _____

BUYER NAME(S): _____

PROPERTY ADDRESS: _____

Closing Date: _____ Time: _____

Buyers email address (if none, fax #) _____

Commission: _____% Listing Agent: _____% Selling Agent _____%

Borrower's Lender: _____

Contact Person: _____ Telephone #: _____

Homeowner's Insurance Co.: _____

Agent: _____ Phone: _____ Prem \$ _____

Marital status of the Buyer?: Single Married Divorced Widow/er

Is this a Primary Residence? If not, please provide mailing address after closing:

Street/PO Box: _____ City/State/Zip: _____

Will all parties be attending the Closing? YES NO

DOES THE BUYER WANT A SURVEY YES NO

We recommend a survey on all purchase closings.

Inspections to be shown on Settlement Statement:

To: _____ Fee: _____

To: _____ Fee: _____

To: _____ Fee: _____

Homebuyer's Warranty : _____ Fee: _____

Termite Inspection _____ Fee: _____

Please note: If past or present termite infestation exists, please advise our office or the lender as soon as possible so that we may ascertain whether the lender will require a structural report.

PLEASE REMIND your client we will need a driver's license or other government-issued photo ID when documents are signed.