

**LANDON A. DUNN, P.A.**  
**Attorney at Law**

*Please send all correspondence to:*  
University Office  
3210 Prosperity Church Road, Suite 101  
Charlotte, North Carolina 28269  
704-688-0505

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

**Seller Information Worksheet**

Please complete the following and return as soon as possible by  
**email (samantha@landondunn.com) or secure fax (704-688-0165).**

**Property Address:** \_\_\_\_\_

**Do you live at this address and occupy this property, OR was this property your primary residence until now?** \_\_\_\_\_ Yes \_\_\_\_\_ No

**Your Full Legal Name:** \_\_\_\_\_ **(required)**  
(First, Middle Name or Initial, Last)

Marital Status: \_\_\_ Single \_\_\_ Married \_\_\_ Separated  
EIN or Social Security #: \_\_\_\_\_ **(required)** Birthdate: \_\_\_\_\_

**Co-Owner's Full Legal Name:** \_\_\_\_\_ **(required)**  
(First, Middle Name or Initial, Last)

Marital Status: \_\_\_ Single \_\_\_ Married \_\_\_ Separated  
EIN or Social Security #: \_\_\_\_\_ **(required)** Birthdate: \_\_\_\_\_

If married, are you married to each other? \_\_\_ Yes \_\_\_ No  
If no, please explain relationship. \_\_\_\_\_

**\*PLEASE NOTE: If you are married, you and your spouse are REQUIRED to sign closing documents.**

Have you been known by any other name? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If so, what name(s)? \_\_\_\_\_

Will ALL owners (and spouses) attend closing? \_\_\_\_\_ Yes \_\_\_\_\_ No

If No, what is the full name of the person who will be the Power of Attorney authorized to sign? (Please note, preparation of a POA will be an additional fee plus recording costs): \_\_\_\_\_

**Current contact information:**

Owner	Co-Owner
Home: _____	_____
Cell: _____	_____
Work: _____	_____
Email: _____	_____

Your new mailing address: (REQUIRED) \_\_\_\_\_

(Your contact information is required for this closing and we will NOT use it for marketing or solicitation purposes.)

**Your Real Estate Agent:**

Name: \_\_\_\_\_

Agency: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email address: \_\_\_\_\_

Agent: \_\_\_\_\_

Commissions: \_\_\_\_ (%) (Listing Agent) \_\_\_\_ (%) (Buyers Agent)

Any Bonuses? \_\_\_ Yes \_\_\_ No

If yes, amount \_\_\_\_\_ To: \_\_\_\_\_

**Deed & Lien Waiver (Initial One)**

\_\_\_\_\_ I would like for LONDON A. DUNN, P.A. to prepare a deed and lien waiver for me. The fees are: \$350 for preparation of deed and lien waiver, ordering payoffs and obtaining Homeowner's Association dues certification, and seller closing appt. Shipping and Handling \$20/package. Any additional work performed for the Seller, which is necessary to advance the Buyer's closing, including clearing any title issues, will result in additional fees to the Seller and billed hourly at the rate of \$250/hour.

**Please note the preparation of these documents is an accommodation for the Buyer and does not create an attorney/client relationship between Landon A. Dunn, P.A. and the Seller. We cannot provide any legal advice to you as the Seller other than to seek advice from legal counsel of your choice.**

\_\_\_\_\_ I will have my own deed and lien waiver prepared by my own attorney. There will be a \$150.00 coordination fee charged for Landon Dunn's office to remedy any document defects. There will also be a \$20 shipping and handling fee per overnight package.

**It is our goal to make real estate commission checks and funds available as soon as practical following closing. However, NC State Bar Rules expressly prohibit disbursing any closing funds prior to recording. Should you request funds be wired, our office can accommodate the request for a fee of \$75.00. In order to prevent fraud and protect your proceeds, all wiring instructions will be verified and you will be required to sign the instructions at the closing ceremony. THIS OFFICE WILL NOT ACCEPT CHANGES TO WIRING INSTRUCTIONS.**

Name of attorney: \_\_\_\_\_

Phone #: \_\_\_\_\_

PLEASE NOTE: Any work performed for the Seller outside of our normal scope may result in additional fees to the Seller.

**Current mortgages (please use additional pages if necessary)**

**Loan 1:** Bank Name: \_\_\_\_\_

Account #: \_\_\_\_\_

Phone number: \_\_\_\_\_

**Loan 2:** Bank Name: \_\_\_\_\_

Account #: \_\_\_\_\_

Phone number: \_\_\_\_\_

**Homeowner Association or Management Company?** \_\_\_ Yes \_\_\_ No

Contact: \_\_\_\_\_

Phone #: \_\_\_\_\_

Amount \$ Frequency of Dues: \_\_\_\_\_

**Any special assessments due or pending?** \_\_\_ Yes \_\_\_ No

**Is the Seller a Trust, LLC or other Corporation?** \_\_\_ Yes \_\_\_ No

If yes, who will be signing on behalf of the trust, LLC, or Corporation?

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Please provide copies of the corporate or trust documents authorizing this person to sign.

Please list any invoices to be paid at closing: \_\_\_\_\_

**Please provide copies of all invoices to our office ASAP.**

Amount: To: \_\_\_\_\_

Amount: To: \_\_\_\_\_

Amount: To: \_\_\_\_\_

**Have you hired anyone to perform any work on the property in the past 6 months?** \_\_\_ Yes \_\_\_ No

If yes, please briefly describe the nature of the work performed and the approximate total value:

\_\_\_\_\_

Has this work been paid in full? \_\_\_ Yes \_\_\_ No

Will this be paid at closing? \_\_\_ Yes \_\_\_ No If yes, please forward invoice.

Is a mobile home located on this property? \_\_\_ Yes \_\_\_ No

Is this transaction part of a short sale? \_\_\_ Yes \_\_\_ No

Will there be a Home Warranty? \_\_\_ Yes \_\_\_ No

Do you have a current survey? \_\_\_ Yes \_\_\_ No If yes, please fax a copy

Is there anyone, other than you (the Seller), in possession of the property? \_\_\_ Yes \_\_\_ No

Is any Seller involved or expecting a bankruptcy or guardianship? \_\_\_ Yes \_\_\_ No

Does the Seller have any tax liens or judgments? \_\_\_ Yes \_\_\_ No

Is any Seller a Non-Resident Alien or Foreign person? \_\_\_ Yes \_\_\_ No

**Per Federal IRS regulations, you are required by law to provide Landon A. Dunn, P.A.**

**with your correct taxpayer identification number (i.e. Social Security Number or Employer**

**Identification Number). If you do not provide Landon A. Dunn, P.A. with your correct**

**taxpayer identification number, you may be subject to civil or criminal penalties imposed by law.**

Signed \_\_\_\_\_

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

Signed \_\_\_\_\_

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

**LANDON A. DUNN, P.A.**  
**Attorney at Law**

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3210 Prosperity Church Road, Suite 101  
Charlotte, North Carolina 28269

**AUTHORIZATION  
VIA TELEFAX**

TO: \_\_\_\_\_  
ATTN: \_\_\_\_\_  
FAX: \_\_\_\_\_  
RE: \_\_\_\_\_  
Loan Number: \_\_\_\_\_  
Social Security No.: \_\_\_\_\_  
Property Address: \_\_\_\_\_

Dear Sir / Madam:

Seller authorizes the release of information to **LANDON A. DUNN, P.A.**, of any documents from third parties which are necessary in the preparation and execution of the sale of their property. This release of information includes, but is not limited to, written payoff statements from lending institutions. **Seller also hereby authorizes and directs their lending institutions(s) to freeze and close any home equity line of credit secured by this property.**

IF checked, this is a request for a payoff of a loan. Please issue a payoff amount in full for the above captioned lien good through \_\_\_\_\_. Also, please include a **per diem** on the payoff so that we can accurately calculate the exact amount for the time of arrival at your offices.

Please return the payoff information via our **secure fax** to **704-688-0165**. If this is not possible, please return the payoff by telephone or in writing to the above address. We will also require a street address for delivery of express funds for payoff.

Thank you for your attention regarding this matter.  
Sincerely,

**Landon A. Dunn, P.A.**

**I hereby authorize Landon A. Dunn, P.A. to obtain said information on my/our behalf and to Modify, subordinate, block, freeze any escrow account, or freeze any equity line account for the purpose of refinancing or selling the property listed above.**

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

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