

ESCROW TAKE SHEET



Escrow Opened		Escrow Number		Est. Closing Date	
Price: \$	Terms:	Deposit Amt:	In Escrow <input type="checkbox"/> or with Broker <input type="checkbox"/>		
Will Buyer Occupy Property? YES <input type="checkbox"/> NO <input type="checkbox"/>					
Property Information:					
Address:					
Unit/Suite #:					
City, State, Zip:					
Legal Description: APN #					

SELLERS INFO

BUYERS INFO

Seller Name:		Buyer Name:	
Address:		Address:	
Suite/Apt.		Suite/Apt:	
City, State, Zip		City, State, Zip	
Phone (home):		Phone (home):	
Phone (work):		Phone (work):	
Fax #:		Fax#:	
Email Address:		Email Address:	
Additional Seller Name:		Additional Buyer Name:	
Address:		Address:	
Suite/Apt.		Suite/Apt:	
City, State, Zip		City, State, Zip	
Phone (home):		Phone (home):	
Phone (work):		Phone (work):	
Fax #:		Fax#:	
Email Address:		Email Address:	
SELLERS BROKER:		BUYERS BROKER:	
Agent:	Comm. %	Agent:	Comm. %
Address:		Address:	
City, State, Zip		City, State, Zip	
Phone Number:		Phone Number:	
Fax Number:		Fax Number:	
Email Address:		Email Address:	

Title Co. :	Home Warranty: <input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Buyer <input type="checkbox"/> Seller pays	Max Prem.: \$	Termite: <input type="checkbox"/> Y <input type="checkbox"/> N
Land Lease: <input type="checkbox"/> Y <input type="checkbox"/> N	Amount: \$	Leaseholder:		
Name of HOA :	Mgmt Co.:	Phone #:	Fax #:	
HOA Monthly Dues: \$	Seller Pays Transfer: <input type="checkbox"/> Y <input type="checkbox"/> N			
New Lender:	Phone #:	Fax:		

Additional Instructions:
