



**BROKER'S DEMAND**

Date: \_\_\_\_\_ SHORT SALE? YES \_\_\_\_\_ NO \_\_\_\_\_ Primary -or- Investment for buyer? (circle one)

COMPLETE TITLE TO HANDLE: Seller's side / Buy \_\_\_\_\_ er's side / Both sides (Circle One)

Other Title Company (if applicable) : \_\_\_\_\_  
Title Co. Name \_\_\_\_\_ Phone Number \_\_\_\_\_  
Email Address \_\_\_\_\_ Contact Name \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_  
Number Street City/Town/Village Zip County

LEGAL DESCRIPTION (If known): \_\_\_\_\_

LISTING AGENT: \_\_\_\_\_  
Name Phone Email Address  
Company \$ \_\_\_\_\_  
Broker compliance fee to be paid by Seller?

SELLER(S): \_\_\_\_\_  
First Name Middle Name Last Name Marital Status Social Security #  
First Name Middle Name Last Name Marital Status Social Security #  
Current Mailing Address Phone Number  
Forwarding Address (after closing) Email Address  
Attorney Name (if applicable) Attorney Phone Email Address

Power of Attorney for Seller(s)? YES \_\_\_\_\_ NO \_\_\_\_\_ If yes, \_\_\_\_\_  
Name of Power of Attorney

FOR: BOTH SELLERS / FOR HUSBAND / FOR WIFE  
(Circle One)

Address of Power of Attorney \_\_\_\_\_

PAYOFF INFO: \_\_\_\_\_  
Current mortgage company Phone # Loan #  
Home Equity Line of Credit (if any) Phone # Loan #

SELLING AGENT: \_\_\_\_\_  
Name Phone  
Company Email Address

BUYER(S): \_\_\_\_\_  
First Name Middle Name Last Name Marital Status Social Security #  
First Name Middle Name Last Name Marital Status Social Security #  
Current Mailing Address Phone Number  
Attorney Name (if applicable) Attorney Phone Email Address

NEW MORTGAGE: \_\_\_\_\_ \$ \_\_\_\_\_  
Lender Name Loan Amount Loan #  
Mortgage Broker/ Loan Officer (if applicable) Phone Email Address

Sales Price: \$ \_\_\_\_\_ Anticipated Closing Date: \_\_\_\_\_ Total Commission: \$ \_\_\_\_\_  
Commission Split: \_\_\_\_\_ EMD amount: \$ \_\_\_\_\_ EMD Held by: \_\_\_\_\_  
Home Warranty Co: \_\_\_\_\_ Premium Amount: \$ \_\_\_\_\_ Paid by: \_\_\_\_\_  
Are there Mandatory Homeowners / Condominium Association Dues: YES \_\_\_\_\_ NO \_\_\_\_\_

Association / Management Company Name Phone Number Contact Name

Is there a separate Trash pickup / Waste Disposal service at this property? YES or NO. If Yes, provide the name of company and contact #: \_\_\_\_\_

**Attachments:** ( ) Purchase Agreement ( ) Payoff Authorization Letter(s) ( ) Lead Based Paint Disclosure  
(check all that apply) ( ) Seller's Disclosure ( ) Agency Disclosures ( ) Exclusive Right to Sell Contract  
( ) Seller's Owner's Policy ( ) LLC / Corp. Operating Agmt ( ) Divorce Decree  
( ) TRUST AGREEMENT

Additional Instructions: \_\_\_\_\_