

CONTRACT COVER FORM

Date: _____ Sales Representative _____

REO #: _____ Loan # _____ Closing Date _____

Owner Occupant _____ or Investor _____ Purchase Price \$ _____

All Cash/Other Financing _____ HomePath Mortgage financing _____ HomePath Renovation _____

Property Address: _____

Street: _____

City/State/ZIP: _____

County: _____

Complete Names(s) in which title is to be taken (must match offer screen): _____

LISTING AGENT INFORMATION

Listing Agent Name: Ralph and Karen Chiodo Company: Exp Realty LLC

Email: _____

Company Address: Street: _____

City/State/ZIP: _____

Phone No. _____ Fax No.: _____

SELLING AGENT INFORMATION

Selling Agent Name: _____ Company: _____

Email: _____

Company Address: Street: _____

City/State/ZIP: _____

Phone No. _____ Fax No.: _____

BUYER'S ATTORNEY or SETTLEMENT AGENT (if applicable)

Name: _____ Company: _____

Email: _____

Company Address: Street: _____

City/State/ZIP: _____

Phone No. _____ Fax No.: _____

FINANCING LENDER INFORMATION

Contact Name: _____ Company: _____

Email: _____

Company Address: Street: _____

City/State/ZIP: _____

Phone No. _____ Fax No.: _____

HOA INFORMATION (if applicable)

Contact Name: _____ Company: _____

Email: _____

Company Address: Street: _____

City/State/ZIP: _____

Phone No. _____ Fax No.: _____

CLOSING AGENT INFORMATION

Contact Name: _____ Company: _____

Email: _____

Company Address: Street: _____

City/State/ZIP: _____

Phone No. _____ Fax No.: _____