



PO Box 7227
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Contact Information Sheet

Property: _____

Nolan Commercial Contractors, Inc.

Nolan Sydes or Jennifer Crom

Office Hours: Monday – Friday, 8am – 4pm

Listing Agent Contact

Firm: _____

Agent: _____

Phone(s): _____

Email: _____

Selling Agent Contact

Firm: _____

Agent: _____

Phone(s): _____

Email: _____

Buyer's Information

Name: _____

Current Address: _____

Phone(s): _____

Fax: _____

Email: _____