

SELLER INFORMATION CHECKLIST

Please review and complete this Information Checklist to the best of your ability and return it to our office via email to realestate@molloylawllc.com, fax to 866-450-4884 or by mail to 15 Woodland Center Drive, P.O. Box 687 Grove City, PA 16127. If you have any questions, please contact our office at 724-458-4805.

PART I: CONTACT INFORMATION

| YOU | SPOUSE | | | | |
|--|--|--|--|--|--|
| What is your <u>legal</u> name? | What is your spouse's <u>legal</u> name? | | | | |
| First Middle Last How do you want your name to appear on legal documents? | First Middle Last How do you want your name to appear on legal documents? | | | | |
| DOB: U.S. Citizen? Yes No | DOB: U.S. Citizen? Yes No | | | | |
| SSN: | SSN: | | | | |
| Home Address:Street | City State Zip | | | | |
| County where you reside: | Home Phone #: | | | | |
| Cell Phone #: | Cell Phone #: | | | | |
| Email Address: | Email Address: | | | | |
| May we email your drafts to you? □ No □ Yes | | | | | |
| Do you intend to use a Power of Attorney? □ No □ Yes If yes, please forward a copy for review. | | | | | |

PART II: MORTGAGE PAYOFF

| If there is a mortgage that exists on your property, we will be required to order a payoff statement to be used at the time of closing. Please check the applicable information below: |
|--|
| □ I do not have an existing mortgage on the property. |
| □ I direct Molloy Law, LLC to obtain my loan payoff statement for closing. By selecting this option, I understand that Molloy Law, LLC will be in contact with me regarding an authorization to obtain this information. |
| PART III: PROCEEDS |
| Proceeds may be received in the form of an IOLTA Account Check (no fee) or by Wire Transfer (fees apply). Kindly select your preference below: |
| □ Check □ Wire Transfer |
| If you have selected a Wire Transfer please complete the following wire instructions: |
| Bank Routing #: Bank Account #: Bank Name: Bank Address: |
| Name on the Account: |
| Please note wire transfers may be subject to additional fees from our financial institution and/or your financial institution. |
| PART IV: LEASES |
| As part of the title insurance process, please provide a full copy of any existing oil and gas leases or any other lease agreements. |
| □ No lease(s). |
| □ Existing lease(s) attached. |

PART V: SCHEDULE OF CLOSING

| A confirmed | closing time cann | ot be scheduled | l until our | office | receives a | "Clear to | Close." | We will |
|----------------|---------------------|-------------------|---------------------|--------|--------------|------------|---------------|----------|
| provide final | settlement figures | in advance and | as soon a | s they | are readily | available. | <u>Please</u> | keep in |
| mind this is o | often very close to | he time of closin | 1g . As part | of pre | paration for | closing ou | r office i | needs to |
| understand w | hether you will att | end closing. Plea | ase indicate | your i | ntention be | low: | | |

| ☐ Yes, I will attend closing. |
|----------------------------------|
| □ No, I will not attend closing. |

Please note we will need all parties to attend closing or to have planned without our office not to attend.

PART VI: OTHER CONSIDERATIONS

Homeowner's Association (HOA):

If you are a member of a Homeowner's Association, please provide the contact information for your Association:

| Name: | | | |
|----------|------|--|--|
| Phone #: | | | |
| Address: | | | |

Mobile Home:

If this transaction concerns a mobile home, please provide a copy of the title. In the event you do not have a copy of the title or written confirmation that it has been retired by the Commonwealth of Pennsylvania, please contact our office immediately as we will need to obtain additional information.