STRINGHAM WEST REALTY – TRANSACTION REPORT NOTE: ALL INFORMATION IS REQUIRED – IF NOT COMPLETE, DOCUMENTS WILL BE RETURNED

| ACCEPTANCE DATE | | MLS# | | _ SETTLEMENT DEA | DLINE | | |
|--------------------------------|------------------------------|-----------------|--------------------|------------------|-------|-----|---------|
| LISTING COMPANY | | | AGENT | | | | |
| SELLING COMPANY | | | AGENT | | | | |
| PROPERTY ADDRESS YEAR BUILT | STREET (If Before 1978, I | ead Based Paint | Docs Are Required) | CITY | | ZIP | |
| BUYER | | | | | | | |
| SELLER | FIRST | STREET | | CITY | STATE | ZIP | PHONE # |
| LAST | FIRST | STREET | | CITY | STATE | ZIP | PHONE # |
| YOUR CLIENTS EMAIL ADDRESS: | | | | | | | |
| | | | | | | | |
| | | | | | | | |

| REFERRAL: YES () NO () IF YES: SELLING () LISTING () | | | | | |
|--|--------|-------------|------|-----|---------|
| REFERRING BROKERAGE | | REFERRING A | GENT | | |
| ADDRESS | | | | | |
| S | STREET | CITY | ST | ZIP | PHONE # |

| FINANCING USED | BUYER SOURCE | SELLER SOURCE | PROPERTY TYPE |
|---|--|--|---|
| USDA Assumption FHA Conventional Cash VA | Past Customer Co-op Broker Personal Referral Floor Call | Past Customer Co-op Broker Personal Referral Floor Call | () Residential () Farm () Land () Commercial () Multi-unit |
| Other | Other | Other | Other |

| | | | COMMISSION PAID: |
|---|----------------------------------|--|-------------------------------|
| MLS STATUS | | LIST PRICE \$ | () GROSS |
| Presently Listed | Yes () No () | SALES PRICE \$ | () NET |
| Status of Listing Under Contract Time Clause | Yes () No () Yes () No () | SELLER PAID \$ CLOSING COSTS | |
| | | | BASE BROKERAGE FEE: |
| OFFICE STATUS Primary Offer Back-Up Offer Additional Information | Yes () No () Yes () No () | LISTING COM. \$or SELLING COM \$or REFERRAL FEE \$or | r % () AGENT PAYS |
| | | | (Only if Representing Seller) |

DO NOT WRITE IN BOX – FOR ADMINISTRATIVE USE ONLY

EM Held by SWR \$_____

Date Deposited _____

SWR Transaction #

TITLE COMPANY & LENDER CLOSING INSTRUCTIONS

Stringham West Company Number: 5460645-CN00

| PROPERTY: | | | |
|--------------------|---------|----------------|----------|
| | | SELLER AGENT: | |
| | | PHONE #: | |
| SELLER TITLE | | BROKERAGE: | |
| COMPANY: | | CELLED. | |
| OFFICER: | | SELLER: | |
| | Phone # | PHONE#: | |
| BUYER TITLE | | | |
| COMPANY: | | BUYER AGENT: | |
| OFFICER: | | PHONE #: | |
| | Phone # | BROKERAGE: | |
| LENDER | | BUYER: | |
| LOAN OFFICER | | | |
| | Phone # | PHONE #: | <u> </u> |

We have been advised that you will be handling the closing for the above referenced transaction. <u>PLEASE NOTE THE FOLLOWING INSTRUCTIONS REGARDING THE REAL ESTATE</u> <u>BROKERAGE FEES:</u>

STRINGHAM WEST COMMISSION:

A Sales Commission of _____% of the sales price of \$_____and a flat fee of \$295 IS or IS NOT being included; If it is included it is the responsibility of the BUYER or SELLER and should be made payable to Stringham West Realty upon recording.

PLEASE ISSUE THIS IN ONE CHECK.

OTHER BROKERAGE COMMISSION:

____% or \$_____

HOME WARRANTY:

There **IS IS NOT** a Home Warranty being purchased for this property payable out of closing. If one is to be included the premium amount of \$_____ should be collected. The check should be made payable to and sent to:

Home Warranty Company. Phone #: **HOA CONTACT:**

NAME:_____

NUMBER:

HOA MONTHLY FEE \$_____

HOA TRANSFER FEE \$

If there are any questions pertaining to the preceding instructions please notify me as soon as possible to prevent any complications with the closing of the transaction.

Thank You,

Richard Stringham Principal Broker

