

PROPERTY INFORMATION – SALE OF EXCHANGE PROPERTY

Please provide the information below and we'll do the rest.

SELLER INFORMATION			
Individual Name: First		Last	
Name on Title		Tax ID #	
Address		Phone	_
CityStateZip		Email	
Seller's Agent:		Email	
PROPERTY INFORMATION Property Address			
Property Type			
ale Price: \$ Estimated Closing Date:			
TRANSACTION DETAILS			
Escrow/Closing Agent		Escrow No	
Contact Name	Phone	Email	
Address	City	StateZip	
Buyer Name (Individual or Entity)			
Address	City	StateZip	
Please return this form with the following documents: Purchase/Sale Agreement Preliminary Title Report			

Direct any questions to:

Rev.: 030121

Brian Greene (801) 221-1031 brian@1031servicecenter.com

Submit FORM via email or fax