

# SAPIRO GOTTLIEB & KROLL

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Of Counsel  
David M. Sapiro†

## SAPIRO GOTTLIEB & KROLL INFORMATION SHEET FOR SELLERS

- Exact name of each party as it appears on the Deed: \_\_\_\_\_  
Are you selling the entire property as it appears in your deed? \_\_\_\_\_  
  
Property Address for Sale: \_\_\_\_\_  
  
\_\_\_\_\_ LOT \_\_\_\_\_ BLOCK \_\_\_\_\_
- Name of Seller: (1) \_\_\_\_\_  
Name of Seller: (2) \_\_\_\_\_
- Address of Seller: (1) \_\_\_\_\_  
Address of Seller: (2) \_\_\_\_\_  
  
Fax #: (1) \_\_\_\_\_ Home Phone: (1) \_\_\_\_\_  
Work Phone: (1) \_\_\_\_\_ Cell Phone: (1) \_\_\_\_\_  
  
Fax #: (2) \_\_\_\_\_ Home Phone: (2) \_\_\_\_\_  
Work Phone: (2) \_\_\_\_\_ Cell Phone: (2) \_\_\_\_\_  
  
Email: (1) \_\_\_\_\_  
Email: (2) \_\_\_\_\_
- Age of Seller(s): (1) \_\_\_\_\_ (2) \_\_\_\_\_ Are any of the Sellers disabled?  
Y/N (circle please) Are any of the Sellers blind? Y/N (circle please) (For Realty  
Transfer Fee Purposes)

5. Marital History (1) – Have you been previously married: Yes \_\_\_ No \_\_\_ **If yes, please attach a copy of your Judgment(s) of Divorce(s) upon returning this document. If widowed, please provide name, date of death and county/state of death of spouse as well as a copy of the death certificate.**

Date of Current Marriage: (1) \_\_\_\_\_ **Maiden** name of Seller: (1) \_\_\_\_\_

6. Marital History (2) – Have you been previously married: Yes \_\_\_ No \_\_\_ **If yes, please attach a copy of your Judgment(s) of Divorce(s) upon returning this document. If widowed, please provide name, date of death and county/state of death of spouse as well as a copy of the death certificate.**

Date of Current Marriage: (2) \_\_\_\_\_ **Maiden** name Seller (2): \_\_\_\_\_

7. Social Security Number(s): (1) \_\_\_\_\_ (2) \_\_\_\_\_

8. DATE OF BIRTH (1) \_\_\_\_\_ (2) \_\_\_\_\_

9. Seller's Address after closing: (1) \_\_\_\_\_

\_\_\_\_\_

Seller's Address after closing: (2) \_\_\_\_\_

\_\_\_\_\_

10. Type of Residence being sold: Single Family \_\_\_ Two Family \_\_\_  
Four Family \_\_\_ Condominium \_\_\_ Co-Op \_\_\_ Town House \_\_\_  
Multi Family \_\_\_ (If so, # of units) \_\_\_ If the property is more than a one family dwelling, please state the name, apartment number, amount of rent paid, date rent is due and amount of security deposit for each tenant on a the back of this page. If there is a written lease, please forward a copy to our office. Is there oil or gas heat? \_\_\_\_\_  
What utilities does the tenant(s) pay for? \_\_\_\_\_  
What utilities does the landlord pay for? \_\_\_\_\_  
Which apartments, if any, are to be delivered vacant at time of closing? \_\_\_\_\_

11. Estimated Age of property: \_\_\_\_\_

12. Are there open Mortgages of Record (**including Equity Loans**) on Subject Property?  
**If yes, please furnish the following: Name of bank(s), account number(s) and Phone Number(s):**

_____	Acct # _____
_____	Tele # _____
_____	Acct # _____
_____	Tele # _____
_____	Acct # _____
_____	Tele # _____

What type of loan(s) do you have (i.e., VA, FHA, Conventional equity line, etc.)?  
 \_\_\_\_\_ Remember, if you have an equity line, 15 days before the projected closing date, the account must be “frozen” and a statement obtained from the lender stating “the account is frozen and no further draws can be made without the written approval of: \_\_\_\_\_” which document will be sent to the Purchasers’ attorney.

13. If there is a Condo/Homeowner’s Association of any kind, please furnish the following:

Name: \_\_\_\_\_ **Contact Name:** \_\_\_\_\_

Address: \_\_\_\_\_

**Telephone #** \_\_\_\_\_ **Amt of annual dues and how paid:** \$ \_\_\_\_\_

**Please furnish our office with a copy of the Bylaws and/or Disclosure Statement as well as the survey certification and certificate of insurance.**

14. Does any Seller own other land/building(s) which touch the property being sold? \_\_\_\_\_

Does any Seller own any land next to the property being sold? \_\_\_\_\_

15. List the name of the attorney who represented you when you purchased the property:

\_\_\_\_\_ City/State \_\_\_\_\_

16. Are the following improvements: **Completed** **Under Construction** **Not In**

Sewer:	_____	_____	_____
City Water:	_____	_____	_____
Curbs:	_____	_____	_____
Sidewalks:	_____	_____	_____
Streets:	_____	_____	_____

17. Has the house ever been treated for termites or other infestation? \_\_\_\_\_ **If yes, please give details and send us a copy of any certificates.**
18. Were any improvements (i.e., fence, deck, addition, etc.) added since you purchased the property? \_\_\_\_\_ **If yes, please give details and send us a copy of permits.**
19. Is there a septic system? \_\_\_\_\_ **If yes, when was the last time it was inspected?**  
\_\_\_\_\_
20. Is there a well? \_\_\_\_\_ **If yes, when was the last time it was inspected?**  
\_\_\_\_\_
21. Type of fuel – gas or oil (**please circle one**).
22. Water Company address, phone number and account number, if different from township.
23. Is the property subject to the “AFFORDABLE HOUSING” rules and regulations.  
Yes\_\_\_ No\_\_\_
24. To the best of your knowledge, are there presently any oil tanks, underground or otherwise, on the premises, if yes, is it in use? Yes\_\_\_ No\_\_\_
25. Are there tenants occupying the premises? Yes\_\_\_ No\_\_\_ If yes, please state:
  - a. Amount of rent paid monthly: \$\_\_\_\_\_
  - b. Amount of security deposit: \$\_\_\_\_\_ Where is the deposit being held?
  - c. If the tenant has prepaid rent, please state the amount and through what date rent has been prepaid:

**NOTE: Please provide our office with the documents requested herein, and a copy of the following:**

- 1. Deed to the property being sold;**
- 2. Survey; (unless this is a Condo then you do not need to provide a copy of the survey certification)**
- 3. Owner's Title Insurance Policy (not your homeowner's insurance policy). This document lists chain of title and would have been sent to you a short time after you purchased the home;**
- 4. Copy of latest tax bill; and**
- 5. Water well documents, if applicable.**

**If you have any questions or problems, please do not hesitate to contact our office.**

**YOU WILL NEED TO OBTAIN A SMOKE DETECTOR CERTIFICATION AND MAY HAVE TO OBTAIN A CERTIFICATE OF OCCUPANCY FROM THE MUNICIPALITY IN WHICH THE PROPERTY IS LOCATED. PLEASE MAKE ARRANGEMENTS TO OBTAIN THIS DOCUMENTATION PRIOR TO CLOSING AND SUBMIT SAME TO US PRIOR TO CLOSING. ALSO ARRANGE FOR A FINAL METER READING FOR THE DAY OF CLOSING. REMEMBER TO ASK THE UTILITY COMPANIES – PHONE, CABLE, GAS, ELECTRIC, ETC., TO TAKE THE SERVICE OUT OF YOUR NAME EFFECTIVE THE DAY OF CLOSING BUT UNDER NO CIRCUMSTANCES ARE THEY TO “SHUT OFF” SERVICE. REMEMBER TO CANCEL NEWSPAPERS AND ANY OTHER PERSONAL ITEMS THAT MAY BE DELIVERED TO THE PROPERTY.**

**INSURANCE POLICIES IN PLACE ON THE PROPERTY SHOULD NOT BE CANCELLED UNTIL THE DAY AFTER THE CLOSING OCCURS, UNLESS THERE IS A USE AND OCCUPANCY IN PLACE, THEN THE INSURANCE SHOULD BE CANCELLED THE DAY AFTER THE USE AND OCCUPANCY IS TERMINATED AND THE PARTIES HAVE VACATED THE PREMISES.**

**PLEASE BE ADVISED THAT THE DATE SET FORTH IN THE CONTRACT FOR CLOSING IS A TARGET DATE AND NOT A FIRM CLOSING DATE. DO NOT MAKE ANY ARRANGEMENTS FOR MOVING OR TRAVEL UNTIL YOU KNOW FROM US THAT THE CLOSING DATE HAS BEEN FIRMED UP.**

**Thank you for your time and assistance in completing this form.**

**CHECK LIST OF ITEMS TO BRING TO CLOSING**

\_\_\_ Keys

\_\_\_ Garage Door Openers

\_\_\_ Tax Bill

\_\_\_ Water Bill

\_\_\_ Sewer Bill

\_\_\_ Final Fuel Tank Reading

\_\_\_ Original Certificate Of Occupancy, if required

\_\_\_ Original Smoke Detector Certification.

\_\_\_ Original Termite Certification Or Any Subsequent Certifications Showing  
Treatment, If Applicable

\_\_\_ Other

\_\_\_ Other

\_\_\_ Other

\_\_\_ Other

**CONSENT FORM**

TO WHOM IT MAY CONCERN:

The undersigned hereby authorizes the lender(s) to release to the attorneys of both Seller(s) and Purchaser(s), including but not limited to, Sapiro Gottlieb & Kroll, Alan Gottlieb, Esq., Lawrence Kroll, Esq., Tania Cantos, Real Estate Paralegal, or any other agent, employee or associate of Sapiro Gottlieb & Kroll, any and all information regarding the balance due on the mortgage(s), together with the status of any escrow accounts, payment of taxes, etc.

DATED: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_, Seller

DATED: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_, Seller