

## CLOSING CONTACT INFORMATION

Property Name: \_\_\_\_\_ OID #: \_\_\_\_\_

Please provide information for the closing/escrow agent.

Escrow Company Name: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Escrow #: \_\_\_\_\_  
Phone #: \_\_\_\_\_  
E-Mail: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

If the closing will be handled by an attorney:

Name: \_\_\_\_\_  
Firm Name: \_\_\_\_\_  
Phone #: \_\_\_\_\_  
E-Mail: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Real Estate Agent/Realtor:

Name: \_\_\_\_\_  
Company Name: \_\_\_\_\_  
Phone #: \_\_\_\_\_  
E-Mail: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_