

TO:

27611 La Paz Road, Laguna Niguel, CA. 92677 Office: (949) 215-3700

> Fax: (949) 916-3295 www.OldTownEscrow.com

I NEED TO OPEN ESCROW

FROM:
My Contact Info:
Enclosed, please find:
Purchase Agreement
Number of Counter Offers:
Addendum(s) (circle one): YES NO
Wood Destroying Pest Inspection and Allocation of Cost (WPA) (circle one): YES NO
Other Addendum:
Listing Agreement: YES NO
MLS Printout: YES NO
I represent the: SELLER BUYER
Please send my clients paperwork (circle one): Care of my office Direct to my client, their address is:
Title Rep to get credit for this order:
Please order:
Natural Hazards Report with (company name):
Home Protection Policy with (company name):

OPEN ORDER CONTACT INFORMATION SHEET (optional)

Seller(s):		
Name(s):		
Current Address:		
Phone No.: home	work	cell
Email:		
Buyer(s):		
Name(s):		
Current Address:		
Phone No.: home	work	cell
Email:		
Selling Agent:		
Company:	THE VIEW	
Agent Name:		/LN
Phone No.:	4	47.0
Fax No.:		44/1/
Email:		
Listing Agent:		
Company:		
Company:Agent Name:		
Phone No.:		
Phone No.:	e 43	
Fax No.:		
Email:		
Buyer's Lender/Mortg	aga Rrokari	
Company	age broker.	
Company:Contact Name:		
Contact Name:		
Phone No.:		/
Fax No.:		
Email:		
Title Company:		
Company:		
Title Rep:		
Phone No.:		
Fax No.:		W/////////////////////////////////////
Email:		
Lineii.		
Home Warranty Comp	anv.	
_		
Company:		
Phone No.:		
Web Address:		
Natural Hazards Discl	osure Company	
Company:		
Phone No.:		
Web Address:		
Additional Information	n Needed:	