

Vision Realty, Inc.

REAL ESTATE CLOSING INFORMATION SHEET

(To be filled out by Title Company or Buyer's Broker at time of Closing)

You must Email or Fax 405-600-6272 the information below to us *within 24 hours* after closing

MLS Number: _____ Contract Date: _____ Closing Date: _____

Seller's Name _____ Sales Contract Price \$ _____

Buyer's Realtor's Name (if applicable): _____ Realtor's MLS ID _____

Realty Company _____ Phone Number _____

Buyer's Name: _____

Appraisers Name _____ Phone Number _____

Title Company Name: _____

Address: _____ Phone Number: _____

Closing Date: _____ Sold Price \$ _____

Title Company Name: _____

Address: _____ Phone Number: _____

Lender Name: _____ Interest Rate %: _____ Loan Years: _____

Loan Type: _____ Buyer Points: _____ Origination Fee: _____ Loan Amount \$ _____

Any **Seller's Concessions** (did the Seller commit to pay a specific portion of the Buyer's closing or any other costs)? _____

