



CONTRACT FOR DEED INFORMATION FORM

Return Completed Form To: julie@mokslaw.com

Owner Information

Date: _____

1. Property Owner's Full Legal Name: _____
Owner is: married unmarried
If Owner is married, what is the Spouse's Full Legal Name: _____
2. Managing Agent's Name: _____
3. Contact Person: _____
4. Billing Address: _____, _____, _____
Street Address City State Zip Code
5. Telephone No: _____ Email Address: _____@_____
6. Does Owner hold free and clear title to the Premises? Yes No
If no, describe below (i.e. a tax or mortgage lien).

Property Information

7. Address of Premises: _____, _____, _____
Street Address City State Zip Code

Purchaser Information

8. Purchaser's Name: _____ SSN: _____ DOB: _____
Purchaser is: married unmarried
If Purchaser is married, what is the Spouse's Full Legal Name: _____
9. Co-Purchaser's Name: _____ SSN: _____ DOB: _____
Co-Purchaser is: married unmarried
If Co-Purchaser is married, what is the Spouse's Full Legal Name: _____

Purchase Price

10. Purchase Price: \$ _____
11. Interest Rate: _____ % per annum
12. Term of the Contract for Deed: _____ Years _____ Months
13. Payment due on the _____ of the month
14. Late Fee: \$ _____
15. Lump Sum of \$ _____ due on _____, 20__
16. Is Purchase responsible for payment of taxes? Yes No
17. Is Purchaser responsible for payment of insurance? Yes No
18. Is Purchaser responsible for maintenance on the Premises? Yes No
19. Is either party using a real estate broker? Yes No

Documents Needed

20. Do you have a copy of the vesting (your) deed? Yes No
If yes, please attach a copy to this Contract for Deed Information Form.
If no, please attach the full legal description of the Premises to this Contract for Deed Information Form.
21. Do you have an amortization schedule?
If yes, please attach a copy to this Contract for Deed Information Form.

Additional Information

I, the undersigned, am authorized to enter into this agreement on behalf of the above-named property. I agree to have The Law Offices of Anderson & Associates draft all necessary documents in the appropriate Missouri or Kansas venue. I also agree to pay

for the services at the rate of \$300.00 per hour plus costs within 30 days of invoicing, regardless of a third party obligation to indemnify me as a property manager.

Signature

Printed Name

Please let us know how you heard about Our Company! _____