



**CLOSING CONTROL SHEET
PLEASE ATTACH TO CONTRACT**

Phone: 720.221.8143
Email: orderscolo@dftitle.com

PROPERTY ADDRESS: _____
CONTRACT SALES PRICE: _____

SELLER/OWNER: _____
 SELLER/OWNER: _____
 Address: _____
 Contact Phone Number: _____ Contact Email: _____
 Will sellers be at closing? YES NO
 Power of Attorney Needed? YES NO
 Attorney's Name: _____
 Attorney's Address: _____
 Will Seller be Moving out of state? YES NO
 Seller's Forwarding Address: _____

BUYER 1: _____
 BUYER 2: _____
 Address: _____
 Contact Phone Number: _____ Contact Email: _____
 Will buyers be at closing? YES NO
 Power of Attorney Needed? YES NO
 Attorney's Name: _____
 Attorney's Address: _____

LISTING AGENT: _____ Company: _____
 Address: _____
 Email Address: _____
 Phone: _____ Fax: _____ Company Commission % _____
 Broker Administrative Fee: _____ Paid by: Seller Agent

SELLING AGENT: _____ Company: _____
 Address: _____
 Email Address: _____
 Phone: _____ Fax: _____ Company Commission % _____
 Broker Administrative Fee: _____ Paid by: Seller Agent

EXISTING LOAN PAYOFF: 1st
 LENDER: _____
 Address: _____
 Ph: _____ Loan #: _____
 2nd PAYOFF/ OR LINE OF CREDIT:
 LENDER: _____
 Address: _____
 Ph: _____ Loan #: _____

NEW LOAN:
 LENDER: _____
 Address: _____
 Ph: _____ Fax: _____
 Contact: _____
 Email Address: _____

WATER CO: _____ PHONE: _____ SEWER CO: _____ PHONE: _____

DO YOU NEED TITLE TO ORDER THE HOA FINANCIAL DOCS? (SELLER WILL BE CHARGED) YES NO

HOMEOWNERS ASSOCIATION: _____
 MANAGEMENT COMPANY: _____ PHONE: _____
 SUB-ASSOCIATION: _____
 MANAGEMENT COMPANY: _____ PHONE: _____

SPECIAL INSTRUCTIONS OR CIRCUMSTANCES FOR THIS TRANSACTION:

Thank you for your order --- We appreciate your business!!