

9425 Sunset Drive, Suite 124 Miami, Florida 33173 Phone 305-271-0100 Fax 305-726-0096 info@theclosingcompany.net

The realtors must complete below questionnaire in order for us to open and process the file. Please send to closings@theclosingcompany.net or fax to 305-726-0096

Realtor Questionnaire

IF YOUR CLIENT WILL NOT BE PRESENT FOR THEIR CLOSING, YOU MUST ADVISE US WITHIN 3 BUSINESS DAYS OF EFFECTIVE DATE TO AVOID CLOSING DELAYS.

Are you: □ Sel	lling Agent (re	present buyer) 🗆 Listi	ing Agent (represent seller) EFFECTIVE DATE:	
Property addres	ss:			_
Agent name			Agent license #	_
cell			_ email	
Realty compan	y name		Broker license#	
Broker mailing	g address :			
Transaction fee			Commission:% Additional fee:	
Commission check options: hold for pickup		□ hold for pickup	\Box mail \Box wire : \$50(processing fee deducted from commissi	on)
Special instruct	tions:			
			date	
_ •	signature			
	print name			