

1537 East Hill Rd, Suite 100, Grand Blanc MI, 48439 Phone: 810-252-9456

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## RESIDENTIAL PURCHASE ORDER FORM/BROKER DEMAND

Sending Client Name:			_ Company Name:			
Full Sale	Seller Side o	r Buy Side (circle)	Cash F	Purchase	Prelimin	ary Commitment Only
\$ <u>.</u>	Purchase Price	\$ Loan amount (if app	olicable)		Check if Commercial	cial Property
Property Addre	ess:Number	Ctr	eet	City /	Town / Village	County
				-	rown / village	County
egai Descripti	ion / Parcel ID:(if know	/n)				
Seller(s):	Last Name	First	Middle		 Marital Status	
	Last Name	First	Middle		Marital Status	
	Last Name	1 1130	Middle		Marital Otatus	
	Mailing Address (if different	ent from property)			Phone/Email Addr	ess
	Attorney Name (if applica	ble)	Attorney Phone		Attorney Email Add	Iress
Selling Agent:	Selling Office		Location		Phone	Fax
	Agent Name				Email	
isting Agent:	Listing Office	L	ocation		Phone	Fax
	Agent Name				Email	
Buyer(s):	Last Name	First	Middle		 Marital Status	
	Last Name	First	Middle		Marital Status	
ew Mortgage:	Address				Phone/Email Addr	ess
	Attorney Name (if applicable)		Attorney Phone	·	Attorney Email Address	
	Company Name				Mortgage Amount	
	Company Address				Phone	Fax
	Loan Officer or Contact F	Person			Email	
Commissions:	\$ Total	Split	Deposit: S	\$Amou	nt	Held By
Home Warrant	y: Warranty Company			\$Amou	nt	Paid By
Homeowners /	Condo Association Du		No	tion Name		Phone
Attachments:	Purchase Agr		Seller's Signed A	Authorizatio	_	sed Paint Disclosure