



ONEIDA TITLE & ABSTRACT, INC.

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CLOSING INFORMATION CHECKLIST

Ordered By: _____ Company Name: _____
Transaction (Seller/Buyer): _____
Closing Date: _____ Time: _____ Place: _____ Contract Date: _____
Seller Present: Yes ___ No ___ Buyer Present: Yes ___ No ___
Sale Price: _____ Earnest Money: _____ Commission _____
Property Location: _____
Prior Evidence of Title _____
Buyers Lender Information: _____

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| Seller Information |
| Name: _____ |
| Address: _____ |
| Phone Number: _____ |
| E-Mail Address: _____ |
| Fax Number: _____ |
| Social Security Number: _____ |
| Existing Loan: _____ Acct #: _____ Phone #: _____ |
| Attorney: _____ |
| Attorney E-mail: _____ |
| Marital Status: _____ |
| Seller's Primary Residence: _____ |
| Lot size/Acres: _____ |
| Water Frontage _____ |

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|-------------------------------|
| Buyer Information |
| Name: _____ |
| Address: _____ |
| Phone Number: _____ |
| E-Mail Address: _____ |
| Fax Number: _____ |
| Social Security Number: _____ |
| Taking Title As: _____ |
| Attorney: _____ |
| Attorney E-mail: _____ |
| Marital Status: _____ |

Additional Charges

Sellers

Buyers

