



This form must be submitted within 60 days of closing.

1. Property Information

Home Warranty Contract Number (Required): _____

Address: _____

City: _____ State: _____ Zip: _____

Client's Name: _____

Client's E-mail: _____

Client's Phone: _____

Closing Date: _____



Home Warranty Has Been Waived



Property Professionally Inspected

2. Data Collection

Date Inspected

House/Square Footage*

Number of Beds*

Number of Baths #*

Garage Type*

- None 1 Car Attached 1 Car Detached
 2+Car Attached 2+Car Detached

3. Appliance Brand Names

Brand required. Please provide model and/or serial number when reasonably available.

Range Brand*

Furnace/Heat Source Brand*

AC Brand*

Range - Model/Serial #

Furnace/Heat Source - Model/Serial #

A/C - Model/Serial #

Refrigerator Brand*

Dishwasher Brand*

Water Heater Brand*

Refrigerator - Model/Serial #

Dishwasher - Model/Serial #

Water Heater - Model/Serial #

Water Source* (Check all that apply)

- City Water City Sewer Septic Well

* = Required

4. Agent Information

Agent Name: _____ Date: _____

Real Estate Office: _____

City: _____ State: _____ Zip: _____

E-mail: _____

I am representing: Buyer Seller Buyer/Seller

SUBMIT