

TRUE TITLE AND ESCROW, INC.
5110 SOUTH YALE AVENUE
SUITE 435
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(918) 712-9137 Phone (918) 712-2692 Fax
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REAL ESTATE TRANSACTION INTAKE FORM

Date: _____ Submitted By: _____

Property Address: _____

Seller(s) Name: _____

Seller Phone Number/E-mail: _____

Listing Broker (if applicable)/Phone Number: _____

Buyer(s) Name: _____

Buyer Phone Number/E-mail: _____

Selling Broker (if applicable)/Phone Number: _____

Purchase Price: _____ Earnest Money Amount: _____

Cash Purchase Lender Loan Amount: _____

Lender Name/Phone Number: _____

Special Conditions/Additional Information: _____

*If you already have a contract in place for this transaction, please include it with this form.
Otherwise, our office can prepare one for you.