



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: \_\_\_\_\_

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

## 4. Agent Information

Agent Name: \_\_\_\_\_ Date: \_\_\_\_\_

Real Estate Office: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_

I am representing:  Buyer  Seller  Buyer/Seller