



KW PORTLAND PREMIERE
KELLERWILLIAMS. REALTY

Michael J Faunce

Oregon Licensed Broker
Your Best Interest First



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Each Office Independently Owned & Operated

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Michael Faunce

Seller Client / Guardian Contact Detail

this is to provide me guidelines & suggested best practices to implement the wishes of the multiple parties with an interest in this transactions. (This is not a Contract).

A guardian signature is not needed for a BINDING contract - Only Titled Owner is required. As the Titled owner of property identified below I authorize MICHAEL FAUNCE to inform the listed guardians below any and all information involving the sale of this property.

Title Owner Signature: _____

Seller (Titled Owner) Contact Information

Please indicate Document Signatures type allowed

Check One [] Wet Signature Only [] Allow E-signature signing

Seller #1:

First Name: _____ Last : _____
Cell Phone _____ Email _____

- use email you can access if on vacation - (Enter None if None)

Seller #2:

First Name: _____ Last : _____
Cell Phone _____ Email _____

use email you can access if on vacation - (Enter None if None)

Primary Address to use for future Seller Mail: If Unknown then Mark as N.A.

Street Line #1: _____, Street Line #2: _____
City _____ ZIP _____ State ____

SUBJECT PROPERTY ADDRESS

(This is home to be sold/listed)

Street Line #1: _____, Street Line #2: _____
City _____ ZIP _____ State ____

“Primary Guardian”

this contacts directive will be acted upon

“acted upon” means to inform the seller statements made by primary guardian.

First Name: _____ Last : _____
Cell Phone _____ Email _____

use email you can access if on vacation - (Enter None if None)

Street Line #1: _____, Street Line #2: _____
City _____ ZIP _____ State ____

“Secondary Guardian”

this contact will be informed & updated as they request

First Name: _____ Last : _____
Cell Phone _____ Email _____

use email you can access if on vacation - (Enter None if None)