

FEENEY & DIXON, L.L.C.

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REAL ESTATE INTAKE QUESTIONNAIRE & CHECKLIST

WE REPRESENT:

☐

BUYER<sup>1</sup>

☐

SELLER

☐

ESTATE OF

Last Name(s)First Name(s)Middle Initial(Maiden Name)

Last Name(s)First Name(s)Middle Initial(Maiden Name)

CURRENT ADDRESS:

TELEPHONE:

E-MAIL:

TELEPHONE:

E-MAIL:

SOC.SEC. NOS.:

DATE OF BIRTH:

MARITAL HISTORY:

I/We are NOT married/civil union partners

I/We are married to each other. We were married on

I/We are civil union partners. We received our civil union certificate on

This property has never been/will not be occupied as a matrimonial/civil union residence of any of us.

PROPERTY ADDRESS:

(Street, City, State Zip)

(Block)

(Lot)

HOMEOWNERS ASSOCIATION:

Yes

No

ASSOCIATION NAME:

ADDRESS:

TELEPHONE:

FAX:

E-MAIL:

PROPERTY MANAGEMENT COMPANY:

ADDRESS:

TELEPHONE:

FAX:

E-MAIL:

UTILITIES:

Public Water

Private Well

Name, Address & Acct. No.

Public Sewer

Private Sewerage Disposal (Septic)

Electric

Name, Address & Acct. No.

Gas

Name, Address & Acct. No.

OTHER/OPPOSITE PARTY(IES):

BUYER

SELLER

Last Name(s)First Name(s)Middle Initial(Maiden Name)

Last Name(s)First Name(s)Middle Initial(Maiden Name)

CURRENT ADDRESS:

TELEPHONE:

E-MAIL:

TELEPHONE:

E-MAIL:

<sup>1</sup> PLEASE PROVIDE US WITH A COPY OF YOUR LISTING AGREEMENT

◆ www.feenedixon.com ◆

ATTORNEY: \_\_\_\_\_  
(Name) (Firm Name)

\_\_\_\_\_  
(Street, City, State Zip) (Telephone No.) (Fax number)  
\_\_\_\_\_  
(E-mail address)

SENIOR CITIZEN: \_\_\_\_\_ Yes \_\_\_\_\_ No  
MARITAL HISTORY: \_\_\_\_\_ I/We are NOT married/civil union partners  
\_\_\_\_\_ I/We are married to each other. We were married on \_\_\_\_\_  
\_\_\_\_\_ I/We are civil union partners. We received our civil union certificate on \_\_\_\_\_  
\_\_\_\_\_ This property has never been/will not be occupied as a matrimonial/civil union residence of any of us.

REALTOR/S:  
SELLER (Listing Broker)

\_\_\_\_\_  
(Name) (Company/Broker)  
\_\_\_\_\_  
(Street, City, State Zip) (Telephone No.) (Fax number)  
\_\_\_\_\_  
(E-mail address)

BUYER (Selling Broker)

\_\_\_\_\_  
(Name) (Company/Broker)  
\_\_\_\_\_  
(Street, City, State Zip) (Telephone No.) (Fax number)  
\_\_\_\_\_  
(E-mail address)

BUYER: \_\_\_\_\_ MORTGAGE COMMITMENT DUE: \_\_\_\_\_  
NAME OF LENDER: \_\_\_\_\_  
\_\_\_\_\_  
(Street, City, State Zip) (Telephone No.) (Fax number)  
\_\_\_\_\_  
(E-mail address)

FOR ALL BUYERS: PLEASE PROVIDE US WITH A COPY OF YOUR LISTING AGREEMENT

If BUYERS are not married, how will Title be held?

- \_\_\_\_\_ **Tenants in Common:** means that your interest is evenly divided, and upon death one of the party, title devolves to the decedent’s heirs in law or beneficiaries – in other words, the share if fully divisible or conveyable and is separate from the interest of the other party.
- \_\_\_\_\_ **Joint Tenants with Rights of Survivorship:** means title is held by both parties together – or jointly/indivisibly, and should one party die, the other party takes title to the whole.

If no tenancy is describe in the deed, it is presumed that the parties take title as “Tenants in Common” – which is the “usual” way in which unmarried parties take title, based upon the equal financial contribution to the purchase (50/50).

Will this property be: \_\_\_\_\_ Primary \_\_\_\_\_ Investment \_\_\_\_\_ Second/Vacation Home  
Residence Property  
Do you want a survey? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If YES, do you want \_\_\_\_\_ With Markers \_\_\_\_\_ Without Markers

SELLER:  
\_\_\_\_\_  
Last Name(s) First Name(s) Middle Initial (Maiden Name)

IF AN ESTATE:

Estate Of: \_\_\_\_\_  
I am the \_\_\_\_\_ Executor \_\_\_\_\_ Administrator \_\_\_\_\_ Other (specify)

\_\_\_\_\_ Last Name(s) \_\_\_\_\_ First Name(s) \_\_\_\_\_ Middle Initial \_\_\_\_\_ (Maiden Name)

Provide copies of the following:

\_\_\_\_\_ Death Certificate(s) \_\_\_\_\_ NJ Letters of Testamentary \_\_\_\_\_ NJ Inheritance Tax Waiver letter  
\_\_\_\_\_ Form L-9 \_\_\_\_\_ Estate Debts Questionnaire

Do you have Back Title? (I.E. PRIOR TITLE INSURANCE POLICY) \_\_\_\_\_ Yes \_\_\_\_\_ No  
If Yes, please provide copies of the same.

Are you or your spouse: (check all that apply)  
\_\_\_\_\_ 62 years of age or older Name (only 1 name required): \_\_\_\_\_  
\_\_\_\_\_ Legally Blind  
\_\_\_\_\_ Permanently and totally disabled  
\_\_\_\_\_ Receiving disability payments  
\_\_\_\_\_ Not gainfully employed

Is the seller a foreign person (nonresident alien, foreign partnership, foreign estate or foreign trust)? \_\_\_\_\_ Yes \_\_\_\_\_ No  
Are you a New Jersey resident? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If “YES”, do you expect to file a New Jersey Resident Tax Return for the current tax year? \_\_\_\_\_ Yes \_\_\_\_\_ No  
Post-Closing Address (ADDRESS YOU EXPECT TO HAVE AS OF JANUARY OF NEXT YEAR):  
\_\_\_\_\_  
\_\_\_\_\_

Is there an open Mortgage and/or Home Equity Line of Credit? \_\_\_\_\_ Yes \_\_\_\_\_ No  
Mortgage Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
Account Number(s): \_\_\_\_\_  
Home Equity Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
Account Number(s): \_\_\_\_\_  
Title Company/Settlement  
Agent: \_\_\_\_\_  
Address: \_\_\_\_\_  
(Street, City, State Zip)  
\_\_\_\_\_  
(Telephone No.) (Fax number) (E-mail address)  
POLICY ORDER: \_\_\_\_\_ POLICY NO: \_\_\_\_\_

DO NOT WRITE BELOW THIS LINE FOR OFFICE USE ONLY

CONTRACT DATED: \_\_\_\_\_  
DEPOSIT(S): Due By \_\_\_\_\_ Made Payable to: \_\_\_\_\_  
\$ \_\_\_\_\_ HELD BY: \_\_\_\_\_  
\$ \_\_\_\_\_ HELD BY: \_\_\_\_\_  
LOCATION OF CLOSING: \_\_\_\_\_ DATE OF CLOSING TITLE: \_\_\_\_\_  
PAYOFF REQUESTED: \_\_\_\_\_ NOTICE OF SETTLEMENT FILED: \_\_\_\_\_  
FINAL READINGS ORDERED: \_\_\_\_\_ RUNDOWN ORDERED: \_\_\_\_\_  
LAST TAXES PAID: \_\_\_\_\_ CERTIFICATE OF OCCUPANCY: \_\_\_\_\_  
SMOKE DETECTOR: \_\_\_\_\_ WATER/SEWER READINGS: \_\_\_\_\_  
GARBAGE: \_\_\_\_\_

Item Type	Company, date due [date ordered/ delivered]	Responsible Party ( <i>S=Seller</i> ; B=Buyer; T=Title Agent; and, SA=Settlement Agent)	Date received
Back title/most-recent title insurance policy		S	
Home Inspection		B	
Radon Inspection		B	
Termite/Pest Inspection		B	
<i>Well/Water Testing</i>		S	
Lead Testing/Inspection		B	
Asbestos Testing/Inspection		B	
UST Inspection/Testing		B	
<i>Certificate of Occupancy</i>		S	
<i>Certificate of Continuing Occupancy</i>		S	
<i>Smoke/CO/Fire Extinguisher Certification</i>		S	
<i>Certificate of Compliance</i>		S	
Phase I Environmental Assessment			
Phase II Environmental Assessment			
<i>Condominium Statement of Account</i>		S	
<i>Mortgage Pay-off</i>		S	
<i>Final Water Reading/Bill</i>		S	
<i>Final Utility Reading/Bill</i>		S	
Title Binder/Search		B, SA, T	
Tax Search		B, SA, T	
Judgment Search		B, SA, T	
Flood Search		B, SA, T	
Tidelands Search		B, SA, T	
<b>Other</b>			