

Buyer Clients' Name: _____

(For property you are Buying)

NEW LENDER INFORMATION

Name of Lender: _____

Address: _____

Contact Person: _____

Phone No.: _____

NAME OF DEVELOPMENT: _____

Single Family [] Townhouse [] Condo []

HOMEOWNERS/CONDO ASSOCIATION

Is there an Association? No [] Yes [] Do Not Know []

If yes, do you know:

Name: _____

Address: _____

Phone No.: _____ Dues: _____

If yes, do you know:

Name of Insurance Carrier: _____

Address: _____

Phone No.: _____

REQUIRED PATRIOT ACT INFORMATION

His:

Soc. Sec No. _____

Date of Birth: _____

Hers:

Soc. Sec. No. _____

Date of Birth: _____

Drivers License State: _____

DL Number: _____

DL Expiration Date: _____

Drivers License State: _____

DL Number: _____

DL Expiration Date: _____

MARITAL INFORMATION

Date of Marriage: _____

Wife's Maiden Name: _____

Were either of you previously married? No [] Yes []

If yes, who? _____

If yes, please provide us with a copy of the divorce judgment,
as the title company will require it.

WAIVER TO SET CORNER MARKERS

PLEASE NOTE: Pursuant to NJAC 13:40-5.2, accessible missing corner markers must be set unless the waiver below is lawfully executed.

To: Surveyor

From: _____

Re: Street Address: _____

Municipality: _____

County: _____

Block: _____ Lot: _____

Check One: **YES I DO** want corner markers **NO I DO NOT** want corner markers

This is to advise that I/we have been made aware of my right to have corner markers set as part of a survey to be performed on the aforementioned property. In addition, I have been made aware of the potential impact of signing the waiver including: (1) the possible need for a future survey as a result of physical improvements to the property, such as a fence, addition, deck, pool, or shed, and (2) the potential inability of the ultimate user to identify the actual boundary of the property which could result in a boundary dispute with an adjoining property owner and/or property improvements not accurately situated on my property. The right to have corner markers sets is hereby waived, and you are direct to perform the land survey without setting of corner markers as provided by the regulation (N.J.A.C. 13:40-5.2) the State Board of Professional Engineers and Land Surveyors.

X

Ultimate User's Signature(s)

Date

Witness' Signature

Date

Printed or Typed Name of Witness

Address of Witness Typed or Printed

I hereby certify that I have: (1) Advised the ultimate user of the impact of signing the corner marker waiver, which shall include, but not be limited to, the possible need for a future survey as a result of physical improvement to the property and the potential inability of the ultimate user to identify the actual boundary of the property: (2) Reviewed the waiver to ensure that it was properly signed by the ultimate user and witnessed by a person other than a land surveyor and (3) Performed a physical measurement of the property.

New Jersey Licensed Land Surveyor

Date

Seller Clients' Name: _____

(For property you are Selling)

PAY OFF INFORMATION

NAME OF LENDER: _____

ADDRESS: _____

PHONE NO. _____ LOAN NO. _____

Is there a **home equity** Mortgage? No [] Yes []

If yes, provide information

AGE OF SELLER Is Seller 62 years or older? No [] Yes []

NAME OF DEVELOPMENT: _____

Single Family [] Townhouse [] Condo []

HOMEOWNERS/CONDO ASSOCIATION

Is there an Association? No [] Yes []

If yes, provide:

Name: _____

Address: _____

Phone No.: _____ Contact Person: _____

If Association, do you know:

Name Of Assoc. Ins. Carrier: _____

Address: _____

Phone No.: _____

TERMITE, WELL & CONSTRUCTION

Was there prior termite treatment? No [] Yes [] If yes, by whom? _____

Does the property have a well? No [] Yes [] If yes, does the Seller have a Certification? Yes [] No []

Any improvements which required Permits? No [] Yes []

If yes, did you obtain them, when & for what? _____

REQUIRED PATRIOT ACT AND OTHER INFORMATION

Social Security Number(s): _____

Date of Birth: _____

Driver's License(s): _____

Exp. Date _____

Was Property the residence of the Seller(s) for at least the last two years? Yes [] No []

Address of Seller(s) as of January 31, next year:

MARITAL INFORMATION

Date of Marriage: _____ Wife's Maiden Name: _____

Were either of you previously married? No [] Yes [] If yes, who? _____

If yes, please provide us with a copy of the divorce judgment, as the title company will require it.