REAL ESTATE CLIENT QUESTIONNAIRE

James W. Martin, P.A. Attorney at Law

St. Petersburg, Florida 33705 www.jamesmartinpa.com Phone (727) 821-0904 Fax (727) 823-3479 Email jim@jamesmartinpa.com

Please fill out and return this form with as much information as you have readily available. You may supplement it later.

Date	
Referred By	
CLIENT	
Name (Driver License)	
Nicknames	
Email - Personal	
Email - Work	
Phone - Cell	
Phone - Home	
Phone - Work	
Phone - Fax	
Address - Home	
Address - Work	
Client Is Present or Proposed	Owner Seller Landlord Buyer Tenant Neighbor Other:

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PROPERTY	
Address	
County	
Tax Parcel #	
Туре	House Multi-family Condominium Office Retail Commercial Industrial Vacant Land Other:
Other Information	

LEGAL MATTER

For which of the following are you seeking real estate legal advice?

____Sale
____Purchase
____Lease
____Construction
____Easement
___Other:

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OPPOSING PARTY	
Opposing Party's Name	
Opposing Party's Address	
Opposing Party Is Present or Proposed	Owner Seller Landlord Buyer Tenant Neighbor Other
Opposing Party's Attorney (if any)	
Other Information	
BROKER (if any)	
Broker's Name	
Broker's Address	
Broker represents	Client Opposing Party
Broker's Attorney (if any)	
Other Information	

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CLIENT'S ADVISORS (if any)	
	Name and Address
Accountants	
Appraisers	
Insurance Agents	
Engineers and Consultants	
Surveyors	
Other	

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EXISTING DOCUMENTS			
	Copy Attached?	Dates	Who Has Original
Listing Agreement - Draft			
Listing Agreement - Signed			
Contract for Sale - Draft			
Contract for Sale - Signed			
Lease Agreement - Draft			
Lease Agreement - Signed			
Real Estate Tax Bills			
Deeds - Drafts			
Deeds - Signed			
Title Insurance Commitments			
Title Insurance Policies			
Surveys			
Closing Documents - Drafts			
Closing Documents - Signed			
Other Documents			

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