

NY ASSIGNMENTS

ASSIGNMENT APPLICATION FOR PURCHASE/SALE

PROPERTY INFORMATION <input type="checkbox"/> One Family <input type="checkbox"/> Two Family <input type="checkbox"/> Three Family <input type="checkbox"/> Four Family <input type="checkbox"/> Mixed Use Family <input type="checkbox"/> Commercial		
Property address:		
City:	State:	Zip Code:

CURRENT OWNER INFORMATION/SELLER'S INFORMATION		
Name:	Social Security Number:	
Current address:		
City:	State:	ZIP Code:
Home Phone:	Cell Phone:	Email:

EXISTING LENDER INFORMATION/SELLER'S MORTGAGE INFORMATION		
Current mortgage held by:		
Address:	Phone:	Fax:
City:	State:	ZIP Code:
Account number:	Current Mortgage Balance:	

SELLER'S ATTORNEY INFORMATION		
Attorney name:	Contact name:	
Address:	Phone:	Fax:
City:	State:	ZIP Code:

PURCHASER'S INFORMATION		
Name:	Social Security Number:	
Address:	Phone:	Fax:
City:	State:	ZIP Code:

NEW LENDER INFORMATION		
Name:	Contact name:	
Address:	Phone:	Fax:
City:	State:	ZIP Code:

PURCHASER'S ATTORNEY INFORMATION		
Name:		
Address:	Phone:	Fax:
City:	State:	ZIP Code:
Email:		

PURCHASER'S BANK ATTORNEY INFORMATION		
Attorney name:	Contact name:	
Phone:	Fax:	Email:
City:	State:	ZIP Code:

TITLE COMPANY		
Company name:		
Title Number:	Phone:	
Contact name:	Fax:	Email: