

**FACENDO ASSOCIATES, INC**

**6950 CYPRESS ROAD SUITE 206**

**FT LAUDERDALE, FL 33317**

**PH: 954-587-5323**

**FAX: 954-587-4531**

DATE: \_\_\_\_\_ TAKEN BY: \_\_\_\_\_ FILE NO: **07** \_\_\_\_\_

CLIENT #: \_\_\_\_\_ COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_ TEL: \_\_\_\_\_

FAX: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

OWNER/SELLER: \_\_\_\_\_

BUYER: \_\_\_\_\_

**PURCHASE:**  
SALES PRICE \$ \_\_\_\_\_  
DOWN PMT. \_\_\_\_\_  
1<sup>ST</sup> MTG. \_\_\_\_\_

**RE-FI:**  
OWNER VALUE \$ \_\_\_\_\_  
1<sup>ST</sup> MTG. \_\_\_\_\_  
2<sup>ND</sup> MTG. \_\_\_\_\_

LOAN NUMBER \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

BEDROOMS: \_\_\_\_\_ BATHS: \_\_\_\_\_

LEGAL DESCRIPTION: \_\_\_\_\_

CONTACT:	NAME:	WORK:	HOME #:
BUYER	_____	_____	_____
OWNER/SELLER	_____	_____	_____
LISTING BROKER	_____	_____	_____
SELLING BROKER	_____	_____	_____

FEE: \_\_\_\_\_ FIELD APPRAISER: \_\_\_\_\_

INVOICE: \_\_\_\_\_ COLLECT: CASH OR M/O \_\_\_\_\_

**CREDIT CARD-MASTER CARD/VISA**

CARD # \_\_\_\_\_

ADDRESS: \_\_\_\_\_

EXPIRATION DATE \_\_\_\_\_ 3 DIGIT CODE \_\_\_\_\_

SPECIAL INSTRUCTIONS: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_