



**Online Land
Sales Order Form**
Please fax to: (818) 990-5014

Today's Date _____

Tract/Map # - Lot #	Assessor's Parcel # (APN)	Acreage Size	County

Sales Price	Down Payment (20% min.)	Good Faith Deposit*	Monthly Payments
\$	\$	\$	\$
# of Years Financed	Balance	Interest Rate	Start Date
12 years	\$	8.5%	

* To be applied towards down payment

Buyer Information

Buyer's Name

_____ Last _____ First _____ Middle _____

DOB mm/dd/yy _____ SSN _____

Co-Buyer's Name

_____ Last _____ First _____ Middle _____

DOB mm/dd/yy _____ SSN _____

Street Address _____

City _____ State _____ Zipcode _____

Home Phone _____ Work Phone _____

Cell Phone _____ Fax Number _____

Buyer's Signature _____

Co-Buyer's Signature _____

Vesting (single man/woman or joint tenants) _____

OFFICE USE ONLY

Agent Information	1	2	3
Gross Total			
Initial D/P			
Monthly Re:			
Equity applied to Tract-Lot #	Cash to		Approved by