|  |  |
| --- | --- |
| JT_new_logo-reducegap2 | 800 Westchester Avenue ● Suite S340 ● Rye Brook, NY 10573 ● T (914) 381-6700 ● F (914) 381-3131  275 Madison Avenue ● Suite 626 ● New York, NY 10016 ● T (212) 432-3272 ● F (800) 329-9396  30 West Main Street ● Suite 302 ● Riverhead, NY 11901 ● T (631) 395-0500 ● F (631) 405-3155 |

Instructions for completing the Purchaser Information Transmittal Worksheet

Part I Requires all applicable information of the individual representing the LLC, Corporation, or Partnership such as the Managing Member of an LLC.

*Note: this section is not intended for the attorney representing the entity.*

Part II Requires all applicable information of the purchasing entity (LLC, Corp., Partnership, etc.)

Part III Requires Date of Closing, Purchase Price and types of monetary instruments used for the purchase.

Part IV Requires the property address of the premises being insured

Part V Requires all applicable information of any additional parties not mentioned in Part I.

Note: If more space is needed for additional parties please make copies of page 3 of the worksheet.

**Purchaser Information Transmittal Worksheet**

For use in gathering information required by an order issued pursuant to the Bank Secrecy Act

Federal law requires the collection of certain additional information from you regarding your purchase of real property. United States Code Title 31 Section 5236 authorizes the U.S. Department of the Treasury to collect information about certain transactions in specified geographic areas to carry out the purposes or prevent evasions of the Bank Secrecy Act.

(**Note**: *It is NOT necessary to complete the address fields if the information is on a legible copy of the government issued ID submitted.*)

**SETTLEMENT AGENT INFORMATION** *(i.e. Law Firm, Escrow Company, etc.)*

|  |  |  |  |
| --- | --- | --- | --- |
| Settlement Agent Entity Name  Judicial Title Insurance Agency LLC | Settlement Agent Individual’s Name | | |
| Address  800 Westchester Avenue Suite S340 | City  Rye Brook | State  NY | Zip  10573 |
| Phone Number | E-Mail Address | | |
| I declare that to the best of my knowledge the information I have furnished is true, correct, and complete. | | | |
| Signature | Date | | |

**INDIVIDUAL PRIMARILY REPRESENTING PURCHASING LEGAL ENTITY**

**Part I**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| □ Legible copy of government issued identification (*i.e.* passport, driver’s license, *etc.)* - REQUIRED | | | | | | | | |
| Taxpayer Identification Number (if none check none) | | | □ None | Occupation | | | | |
| Last Name | First Name | | | | M.I. | Date of birth | Country of Address (if not U.S.) | |
| ***If address or ID information is not shown (or is not legible) on the government issued identification, please complete below*** | | | | | | | | |
| Address | | | | | City | | State | Zip |
| Identification description | | Identification issued by | | | | | Identification number | |

**NAME & ADDRESS PURCHASING ENTITY**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Taxpayer Identification Number (if none check box)  **Part II** | □ None | Type of Purchaser |  |  |  |
| □ Ltd. Liability Co., ☐ Corporation, ☐ Partnership, ☐ Other | | | |
| Name of purchasing entity | | | | | |
| Doing business as (DBA) name | | | | Country of Address (if not U.S.) | |
| Address | | | City | State | Zip |

**DATE OF CLOSING – TOTAL PURCHASE PRICE – TYPES OF MONETARY INSTRUMENTS USED**

|  |  |  |
| --- | --- | --- |
| Date of Closing  **Part III** | Total Purchase Price – If multiple properties attach a separate sheet with each address and each individual purchase price. | |
| Indicate types of monetary instruments used. If foreign currency received indicate country. | | |
| □ U.S. currency | |  |
| □ Foreign Currency | | Country: |
| □ Cashier’s check(s) | | □ Money Order(s) |
| □ Certified check(s) | | □ Wire or other funds transfer(s) |
| □ Personal Check(s) | | □ Business Check(s) |
| □ Virtual Currency | |  |

Purchaser Information Transmittal Worksheet (*Continued*)

**PROPERTY ADDRESS** – ☐ Multiple properties – Check box and attach a separate sheet with each address and each individual purchase price.

|  |  |  |  |
| --- | --- | --- | --- |
| Address – An address must be listed  **Part IV** | City | State | Zip |
| County | Block & Lot Number (NY only) | | |

**NAMES OF “BENEFICIAL OWNERS”**

For each INDIVIDUAL who, directly or indirectly, owns 25% or more of the equity interests of the Purchaser must be listed below.

(**Note**: *It is NOT necessary to complete the address fields if the information is on a* ***legible*** *copy of the government issued ID submitted to the title underwriter.*)

**Part V**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| □ Legible copy of government issued identification (*i.e.* passport, driver’s license, *etc.)* | | | | | | | | |
| Taxpayer Identification Number (if none check none) | | | □ None | Occupation | | | | |
| Last Name | First Name | | | | M.I. | Date of birth | Country of Address (if not U.S.) | |
| ***If address or ID information is not shown (or is not legible) on the government issued identification, please complete below*** | | | | | | | | |
| Address | | | | | City | | State | Zip |
| Identification description | | Identification issued by | | | | | Identification number | |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| □ Legible copy of government issued identification (*i.e.* passport, driver’s license, *etc.)* | | | | | | | | |
| Taxpayer Identification Number (if none check none) | | | □ None | Occupation | | | | |
| Last Name | First Name | | | | M.I. | Date of birth | Country of Address (if not U.S.) | |
| ***If address or ID information is not shown (or is not legible) on the government issued identification, please complete below*** | | | | | | | | |
| Address | | | | | City | | State | Zip |
| Identification description | | Identification issued by | | | | | Identification number | |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| □ Legible copy of government issued identification (*i.e.* passport, driver’s license, *etc.)* | | | | | | | | |
| Taxpayer Identification Number (if none check none) | | | □ None | Occupation | | | | |
| Last Name | First Name | | | | M.I. | Date of birth | Country of Address (if not U.S.) | |
| ***If address or ID information is not shown (or is not legible) on the government issued identification, please complete below*** | | | | | | | | |
| Address | | | | | City | | State | Zip |
| Identification description | | Identification issued by | | | | | Identification number | |

Purchaser Information Transmittal Worksheet (*Continued*)

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| □ Legible copy of government issued identification (*i.e.* passport, driver’s license, *etc.)* | | | | | | | | |
| Taxpayer Identification Number (if none check none) | | | □ None | Occupation | | | | |
| Last Name | First Name | | | | M.I. | Date of birth | Country of Address (if not U.S.) | |
| ***If address or ID information is not shown (or is not legible) on the government issued identification, please complete below*** | | | | | | | | |
| Address | | | | | City | | State | Zip |
| Identification description | | Identification issued by | | | | | Identification number | |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| □ Legible copy of government issued identification (*i.e.* passport, driver’s license, *etc.)* | | | | | | | | |
| Taxpayer Identification Number (if none check none) | | | □ None | Occupation | | | | |
| Last Name | First Name | | | | M.I. | Date of birth | Country of Address (if not U.S.) | |
| ***If address or ID information is not shown (or is not legible) on the government issued identification, please complete below*** | | | | | | | | |
| Address | | | | | City | | State | Zip |
| Identification description | | Identification issued by | | | | | Identification number | |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| □ Legible copy of government issued identification (*i.e.* passport, driver’s license, *etc.)* | | | | | | | | |
| Taxpayer Identification Number (if none check none) | | | □ None | Occupation | | | | |
| Last Name | First Name | | | | M.I. | Date of birth | Country of Address (if not U.S.) | |
| ***If address or ID information is not shown (or is not legible) on the government issued identification, please complete below*** | | | | | | | | |
| Address | | | | | City | | State | Zip |
| Identification description | | Identification issued by | | | | | Identification number | |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| □ Legible copy of government issued identification (*i.e.* passport, driver’s license, *etc.)* | | | | | | | | |
| Taxpayer Identification Number (if none check none) | | | □ None | Occupation | | | | |
| Last Name | First Name | | | | M.I. | Date of birth | Country of Address (if not U.S.) | |
| ***If address or ID information is not shown (or is not legible) on the government issued identification, please complete below*** | | | | | | | | |
| Address | | | | | City | | State | Zip |
| Identification description | | Identification issued by | | | | | Identification number | |