

SELLER_____

BUYER_____

ATTORNEY INFORMATION FORM 2022

Fill in all of the information, sign and return to Central Jersey Housing Resource Center (CJHRC) 92 East Main St., suite 407, Somerville, NJ 08876 or email to 2cjhrc@gmail.com

Your Name: _____

Attorney Name: _____

Attorney Address: _____

Attorney Phone #: () _____

Fax #: () _____

Attorney E-Mail: _____

IMPORTANT: A representative from CJHRC is required to attend your closing, therefore do not select an attorney that is more than 20 miles from CJHRC address in Somerville, NJ or ensure your attorney will agree to attend the closing at a location that meets this criteria. CJHRC MUST have at least 3 business days' notice of a closing date and must review the closing disclosure and approve same in order for the closing to take place. Dates that closings cannot be scheduled in 2022 due to limited CJHRC staff or holidays are as follows:

January 3 & 17, February 21, April 15 -18, May 27-30, July 1-5, September 2-6, October 10, November 23-28, December 23—27 & December 30.

By signing this form below, I/We authorize and give permission to the Central Jersey Housing Resource Center (CJHRC) to speak with my attorney. I/we also agree that this form has been shared with my/our attorney and if getting mortgage financing with that entity. If I/We have not been certified yet or have not selected a property, I/we understand I/We are responsible to share this form with those parties immediately upon signing a Contract of Sale and applying for a mortgage/loan.

I/We choose Not to use an Attorney. I/We understand and have been encouraged to select a Real Estate Attorney to assist us through the whole process. Legal issues might arise and we will not be represented and CJHRC will not be able to provide any legal guidance.

_____ **Date** _____
Authorized signature

_____ **Date** _____
Authorized signature