

SELLER_____

BUYER_____

ATTORNEY INFORMATION FORM 2021

Directions: Fill in all of the information and return to Central Jersey Housing Resource Center (CJHRC) 92 East Main Street, 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 the closing will need to take place at the CJHRC location. 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 2021 due to limited CJHRC staff or holidays are as follows:

January 18, February 15, April 2 -5, May 31, July 2-5, September 3-6, October 8-11, November 24-29, December 22-27 and December 30 & 31.

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.

_____ **Date** _____
Authorized signature

_____ **Date** _____
Authorized signature