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117 N. BENT STREET  
POWELL, WYOMING 82435  
www.basinlaw.net

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307-271-1001  
877-295-3104 (fax)  
basin@basinlaw.net

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## BUY/SELL AGREEMENT - INTAKE FORM

### Seller Information

Name of Property Owner(s):

Address (where any notices should be sent):

Telephone #:

Email:

### Buyer Information

Name of Buyers:

Address (where any notices should be sent):

Telephone #:

Email:

### Property Information

Legal Description of Property:

County:

Physical Address of Property:

Names on Deed and how titled (JTWRs, Husband and Wife, Tenants in Common, Trustee, etc):

How buyers wish property to be titled (JTWRs, Husband and Wife, Tenants in Common, Trustee, etc):

**Purchase Terms**

Purchase Price:  Interest Rate:  Down Payment:  Number of Months:  Monthly Payments:  Balloon Payment at End of Term:  Payment due on _____ day of month.  Payment "late" after _____ day of month.  Late fee: _____  Place of Payment:	Any personal property or fixtures NOT included in the sale:  _____  During the term of agreement, which party shall pay the following:  <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%;"></th> <th style="width: 20%; text-align: center;">Buyer</th> <th style="width: 20%; text-align: center;">Seller</th> </tr> </thead> <tbody> <tr> <td>Liability/Hazard Insurance:</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Contents Insurance:</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Fire Insurance:</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Property Taxes:</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Closing costs:</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table>		Buyer	Seller	Liability/Hazard Insurance:	<input type="checkbox"/>	<input type="checkbox"/>	Contents Insurance:	<input type="checkbox"/>	<input type="checkbox"/>	Fire Insurance:	<input type="checkbox"/>	<input type="checkbox"/>	Property Taxes:	<input type="checkbox"/>	<input type="checkbox"/>	Closing costs:	<input type="checkbox"/>	<input type="checkbox"/>
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DATE INSPECTIONS TO BE COMPLETED BY: \_\_\_\_\_

ANTICIPATED CLOSING DATE? \_\_\_\_\_

**Other Terms, Including Alternate Payment Plan Information if Needed**