

INFORMATION FOR MAKING AN OFFER (OPTIONAL)

This form does not constitute a disclosure or offer and SHALL NOT become part of any Residential Sales Contract. This information is provided for the sole purpose of assisting Cooperating agent(s) in preparing offers. Seller makes no representations or warranties regarding the accuracy of the information contained in this Information Sheet.

SELLER'S INFORMATION

Seller Name(s): _____

Preferred Delivery: ☐ Mailing Address OR ☐ Fax OR ☐ Email (check all that apply): _____

FIRPTA: Seller ☐ IS OR ☐ IS NOT a "Foreign Person," as defined by the Foreign Investment in Real Property Tax Act (FIRPTA).

1031 Exchange – Seller is selling Property as part of a 1031 Exchange: ☐ Yes OR ☐ No

Real Estate Licensed/Related Parties: ☐ Seller is ☐ an active OR ☐ inactive licensed real estate agent in ☐ Virginia and/or ☐ Other _____. ☐ Listing Broker/Agent is related to Seller.

PROPERTY INFORMATION

Tax Map/ID # _____ Legal Description: Lot(s) _____

Section _____ Subdivision or Condominium _____

Parking Space(s) # _____ County/Municipality _____

Deed Book/Liber # _____ Page/Folio # _____

Street Address _____

Unit # _____ City _____ ZIP Code _____

Mailbox Number: _____

Storage Unit Number(s): _____

Property Subject to:

☐ Condominium Association ☐ Cooperative Association ☐ Property Owners Association

Association Name: _____ Phone #: _____

Management Company: _____ Phone #: _____

Lead-Based Paint: Residential dwellings at Property ☐ were OR ☐ were not constructed before 1978.

Other: _____

UTILITIES INFORMATION

Water Supply: ☐ Public ☐ Private Well ☐ Community Well

Hot Water: ☐ Oil ☐ Gas ☐ Elec. ☐ Other: _____

Air Conditioning: ☐ Oil ☐ Gas ☐ Elec. ☐ Heat Pump ☐ Other _____ ☐ Zones _____

Heating: ☐ Oil ☐ Gas ☐ Elec. ☐ Heat Pump ☐ Other _____ ☐ Zones _____

Sewage Disposal: ☐ Public ☐ Septic for # BR ____ ☐ Community Septic ☐ Alternative Septic for # BR: ____

Other: _____

(If applicable) Association Fee Includes Following Utilities: _____

Utility Companies/Name:

Electric: _____ Gas/Oil: _____

Water: _____ Trash: _____ Pick-up Day(s): _____

Cable: _____ Internet: _____

CONVEYANCES

Yes # Items	Yes # Items	Yes # Items
<input type="checkbox"/> ___ Alarm System	<input type="checkbox"/> ___ Fireplace Screen/Door	<input type="checkbox"/> ___ Refrigerator
<input type="checkbox"/> ___ Built-in Microwave	<input type="checkbox"/> ___ Freezer	<input type="checkbox"/> ___ w/ ice maker
<input type="checkbox"/> ___ Ceiling Fan	<input type="checkbox"/> ___ Furnace Humidifier	<input type="checkbox"/> ___ Satellite Dish
<input type="checkbox"/> ___ Central Vacuum	<input type="checkbox"/> ___ Garage Opener	<input type="checkbox"/> ___ Storage Shed
<input type="checkbox"/> ___ Clothes Dryer	<input type="checkbox"/> ___ w/ remote	<input type="checkbox"/> ___ Stove or Range
<input type="checkbox"/> ___ Clothes Washer	<input type="checkbox"/> ___ Gas Log	<input type="checkbox"/> ___ Wall Oven
<input type="checkbox"/> ___ Cooktop	<input type="checkbox"/> ___ Hot Tub, Equip & Cover	<input type="checkbox"/> ___ Water Treatment System
<input type="checkbox"/> ___ Dishwasher	<input type="checkbox"/> ___ Intercom	<input type="checkbox"/> ___ Window A/C Unit
<input type="checkbox"/> ___ Disposer	<input type="checkbox"/> ___ Playground Equip	<input type="checkbox"/> ___ Window Fan
<input type="checkbox"/> ___ Electronic Air Filter	<input type="checkbox"/> ___ Pool, Equip, & Cover	<input type="checkbox"/> ___ Window Treatments
		<input type="checkbox"/> ___ Wood Stove

OTHER CONVEYANCES _____

DOES NOT CONVEY _____

Fuel Tanks: Leased #: _____ Owned #: _____

Leased Items: _____

LISTING BROKER INFORMATION

Listing Brokerage's Name and Address: _____

Brokerage Phone #: _____

Bright MLS Broker Code: _____

VA Firm License #: _____

Agent Name: _____

Agent Email: _____

Agent Phone #: _____

MLS Agent ID #: _____

VA Agent License #: _____

Team Name: _____

Team Business Entity License #: _____

OTHER INFORMATION

Seller Preferred Settlement Timing: _____

Seller Requests Post-Settlement Occupancy: ☐ Yes OR ☐ No _____

Other Settlement Preferences/Requests: _____

Seller Preferred Septic Inspector (if applicable): _____

Seller Requests: ☐ Proof of Funds with Cash Offers ☐ Lender Prequalification/Preapproval Letter
(check all that apply)

Other: _____



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