

### Sale of Real Estate

The following checklist facilitates the efficient preparation for the upcoming notarisation. We therefore kindly ask you to complete the list as far as possible and submit it to us. Of course we are available for any further questions or personal assistance. We thank you in advance for contacting Schwab | Weiler | Notare and look forward to our further cooperation.

Seller	Seller 1	Seller 2
<b>Name</b>		
(all) <b>First Names</b>		
<b>Maiden Name</b>		
<b>Date of Birth</b>		
<b>Street, No.</b>		
<b>ZIP Code, Place</b>		
<b>Profession</b>		
<b>Phone / Fax</b>		
<b>E-Mail</b>		
<b>Nationality</b>		
<b>Tax Identification No.</b>		
<b>Marital status</b>	<input type="checkbox"/> single <input type="checkbox"/> divorced <input type="checkbox"/> married <input type="checkbox"/> widowed	<input type="checkbox"/> single <input type="checkbox"/> divorced <input type="checkbox"/> married <input type="checkbox"/> widowed
<b>Marital Property Regime (if married)</b>	<input type="checkbox"/> married without marriage contract <input type="checkbox"/>	<input type="checkbox"/> married without marriage contract <input type="checkbox"/>
<b>Date of Marriage</b>		
<b>Domicile at time of marriage</b>		

Purchaser	Purchaser 1	Purchaser 2
<b>Name</b>		
(all) <b>First Names</b>		
<b>Maiden Name</b>		
<b>Date of Birth</b>		
<b>Street, No.</b>		
<b>ZIP Code, Place</b>		
<b>Profession</b>		
<b>Phone / Fax</b>		
<b>E-Mail</b>		
<b>Nationality</b>		
<b>Tax Identification No.</b>		
<b>Purchase Relationship</b>	<input type="checkbox"/> sole ownership <input type="checkbox"/> to                      %	<input type="checkbox"/> sole ownership <input type="checkbox"/> to                      %
<b>Marital Status</b>	<input type="checkbox"/> single <input type="checkbox"/> divorced <input type="checkbox"/> married <input type="checkbox"/> widowed	<input type="checkbox"/> single <input type="checkbox"/> divorced <input type="checkbox"/> married <input type="checkbox"/> widowed
<b>Marital Property Regime (if married)</b>	<input type="checkbox"/> married without marriage contract <input type="checkbox"/>	<input type="checkbox"/> married without marriage contract <input type="checkbox"/>
<b>Date of Marriage</b>		
<b>Domicile at time of marriage</b>		

Sold Real Estate	House/Apartment	Parking Space 1	Parking Space 2
District Court			
Land Registry of			
Registry Sheet			
Parcel No.			
Address			
Sold Inventory (e.g. kitchen, furniture)			
Year of Construction	Living Space	Floor	
Sale of Sub-Area	<input type="checkbox"/> (please attach plan & further details of sub-area, if given)		

Purchase Price	
Purchase Price € (incl. Inventory)	
Inventory Price in € thereof	
Maintenance Reserve in €	
Bank Details of Seller	Bank: IBAN: BIC
Land Charges to be discharged	Bank: Contact Person: Loan No.:
Financing with Land Charge	<input type="checkbox"/> no <input type="checkbox"/> yes, at following Bank:

Current Use	Transfer of Possession ( <i>Key Handover, if any</i> )
<input type="checkbox"/> empty <input type="checkbox"/> used by seller, dispossession until: <input type="checkbox"/> leased to: <input type="checkbox"/> leasing contract will be taken over <input type="checkbox"/> dispossession until:	<input type="checkbox"/> after payment of purchase price <input type="checkbox"/> already occurred on ( <i>date</i> ): <input type="checkbox"/> right after conclusion of contract <input type="checkbox"/> after dispossession <input type="checkbox"/> on the following date:

Placement through Estate Broker
<input type="checkbox"/> no <input type="checkbox"/> yes, through:

Miscellaneous	
Administrator (if condominium)	Name: Address:
Essential defects (e.g. mold formation)	<input type="checkbox"/> unknown <input type="checkbox"/> yes, the following:
Others	

Draft to Seller	Draft to Purchaser	Draft to Estate Broker
<input type="checkbox"/> Post <input type="checkbox"/> Fax	<input type="checkbox"/> Post <input type="checkbox"/> Fax	<input type="checkbox"/> Post <input type="checkbox"/> Fax
<input type="checkbox"/> E-Mail <input type="checkbox"/> Pick-up	<input type="checkbox"/> E-Mail <input type="checkbox"/> Pick-up	<input type="checkbox"/> E-Mail <input type="checkbox"/> Pick-up

Preferred Appointment Date