

# INDIVIDUAL CLIENT INFORMATION FORM

**NOTE: If you are seeking joint legal representation as a married couple, please ask for a different Client Information Form**

## Purpose

The purpose of this form is to gather information about you and the transaction(s) which will be the subject of legal representation or expert witness services. As our investigation may involve a number of different parties to a real estate matter {such as: buyers, sellers, lenders, brokers, other lawyers, governmental entities, businesses and associations etc.}, we ask for a broad range of information. We ask for detailed information in order that we will not need to continually contact you for confirming information during the course of our investigation. Also, when dealing with real estate matters, family and marital history information is often relevant and necessary to the investigation. Your understanding, patience and cooperation is truly appreciated. **If you believe that any of the information requested is not relevant, or you don't prefer to answer the question, simply mark the question as "do not apply" or DNA.**

## Confidentiality

The information requested in this form is of a personal nature. This form will be treated by the law firm as a personal and confidential client record. Please call me at 214-762-1759 if you have any questions or concerns about this form. Alternatively, you may direct questions to the following address:

**Steven G. Lawrence**  
**Attorneys & Counselors at Law - Expert Witness**

**E-mail** [Steve.Lawrence@airmail.net](mailto:Steve.Lawrence@airmail.net)

**Voice:** 214-762-1759

**Fax:** 214-447-9473

**Mailing Address:**  
103 N. Alder Drive  
Allen, Texas 75002

**Street Address:**  
103 N. Alder Drive  
Allen, Texas 75002

**Have you ever used this law firm for any services prior to this matter?**       Yes    No

**Who referred you to this law firm?**

## Legal Status of Client: (check one)

- Individual       Married Couple       General Partnership       Limited Partnership  
 Corporation       Limited Liability Company       Other \_\_\_\_\_

**NOTE:** *If you are other than an individual seeking representation of your separate individual interest(s), please ask for a different Client Information Form*





**Medical Information**

Do you have any medical or physical condition which impairs your ability to conduct business transactions?  
 YES       NO      If "Yes" please provide brief description:

**Home Address Information**

May we communicate with you regarding this matter at any of the home contacts listed below?       Yes       No

Home Street Address: \_\_\_\_\_

Home City: \_\_\_\_\_ Home State: \_\_\_\_\_ Home Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Home Fax: \_\_\_\_\_

Home E-Mail: \_\_\_\_\_ Mobile #: \_\_\_\_\_

Pager #: \_\_\_\_\_

**Occupational Information Section**

Employee       Yes       No

Self Employed       Yes       No

Type of Work: \_\_\_\_\_

Retired       Yes       No

**Business Address**

May we contact you regarding this matter at the business information listed below?       Yes       No

Your Position or Title: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Business City: \_\_\_\_\_ Business State: \_\_\_\_\_ Business Zip: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Ext.: \_\_\_\_\_ Business Fax: \_\_\_\_\_

Business Toll Free # \_\_\_\_\_ Ext.: \_\_\_\_\_

Business E-Mail: \_\_\_\_\_

**MARITAL HISTORY INFORMATION (Please write "N/A" for "not applicable" as appropriate.)**

Current Marital Status:       Single (Never Married)       Married  
 Divorced       Widowed

<u>Current Spouse</u> First, Middle & Last Name		Date of Marriage	City, County & State of Marriage		
No.	<u>Name of Any Prior Spouses</u> First, Middle & Last Name	Date of Marriage	Date of Divorce	Divorce Case/Cause Number City, County & State	For Marriages Terminated by Death, Enter Date of Death of Prior Spouse
1					
2					
3					

Primary Contact Person Information

**Confidential Client Information Form**

**YOUR CHILDREN**

No.	Name of Child First, Middle & Last Name	Date of Birth	Adopted? Y / N	City, County and State of Birth	Name of Other Parent First, Middle & Last Name
1					
2					
3					
4					
5					
6					
7					
8					
9					

**IF YOU NEED ADDITIONAL SPACE, PLEASE USE THE BELOW SPACE OR BACK OF THIS FORM.**

**YOUR GENERAL LEGAL DOCUMENTS**

Primary Contact	Do you have a:	Yes	No	For each "Yes" answer, please provide date/year of document	Notes
	Prenuptial Agreement?				
	Current Will?				
	Durable Power of Attorney?				
	Medical Power of Attorney?				
	Directive to Physicians Family & Surrogates?				
	Authorization to Disclose Protected Health Information (HIPPA Release)				
	Appointment for Disposition of Remains				

NOTE: This information will **not** be used to solicit legal services from you. It is your personal business decision whether or not to have a will, power or attorney, prenuptial agreement, medical power of attorney or other estate planning documents.

**Document Description Table**

This table sets forth a description of some typical real estate related documents. Please indicate below, by checkmark (✓), any documents (either originals or copies) in your possession. It is **not** necessary for you to provide copies of the documents at this time. We will indicate to you which documents to provide. Thank you.

✓	DOCUMENT DESCRIPTION	✓	DOCUMENT DESCRIPTION	✓	DOCUMENT DESCRIPTION
	<b>Funds Disbursement Related</b>		<b>Title Insurance Related</b>		<b>Instruments</b>
	Settlement Statement (Typically HUD-1 Form)		Earnest Money Contract & Addenda		Deed
	Written Payoff Statements		Commitment for Title Insurance		Release of Lien
	I.R.S. 1099 Forms		Owner Policy of Title Insurance		Partial Release of Lien
	I.R.S. W-9 Request for Taxpayer ID Number and Certification		Heirship Affidavits or Probate Court Documents		Deed of Trust
	Invoices		Tax Certificates		Deed of Trust to Secure Assumption
	Check or Draft Copies		Debts & Liens Affidavit		Mechanic Lien Contract
	Escrow Agreement		Closing Affidavit		U.C.C. Forms
	<b>Mortgage Loan Related</b>		Marital Status Affidavit		Trustee's Deed
	Loan Application		Survey		Substitute Trustee's Deed
	Lender's Closing Instructions		<b>Other Miscellaneous Documents</b>		Leases
	Promissory Note		Transmittal Letters		Easements
	Deed of Trust and Addenda		Memoranda		Federal Tax Liens
	Truth-in-Lending Disclosure		Informational Logs		State Tax Liens
	Hazard Insurance Binder or Policy		Notations		Abstract of Judgment
	Flood Insurance Binder or Policy		Certification of Non-Foreign Status		Assignments
	Lender Affidavits		Certificate of Good Standing		Collateral Assignments
	Appraisal		Articles of Incorporation		Reinstatements
	Home Owner Warranty				Mineral Related Documents

Thank you for your assistance and cooperation.

\_\_\_\_\_  
Signature of Primary Contact