

RESALE - PRELIMINARY INFORMATION SHEET (3407)

SEND BACK TO THE GALMAN GROUP WITH PAYMENT-
ATTN: CONDO DEPARTMENT

DATE: _____

NAME OF CONDOMINIUM: Dupont Towers Owners Association

UNIT#/ADDRESS OF PROPERTY: _____

SELLER _____ PHONE _____

BUYER: _____ RESIDENT INVESTOR

Address _____ PHONE _____

TITLE COMPANY _____ PHONE _____

Contact _____ FAX _____

POSSIBLE DATE OF SETTLEMENT: _____

SALES PRICE: _____

MORTGAGE LENDER: _____ Phone _____

REALTOR/BROKER _____ Phone _____

MAIL PACKAGE TO: (MUST BE SENT TO SELLER OR SELLER'S AGENT):

\$250.00 _____

PAYABLE IN ADVANCE TO:

THE GALMAN GROUP, 261 Old York Road, Suite 110

P0 BOX 646, JENKINTOWN, PA 19046

Phone: (215)-886-2000 215) 886-4972 – FAX

Email: sherzog@galmangroup.com

3407 PACKAGE SENT _____ **INITIALS** _____