

# KANSAS REAL ESTATE SALES VALIDATION QUESTIONNAIRE

<b>FOR COUNTY USE ONLY:</b>	COV # _____	CO. NO. _____	MAP _____	SEC. _____	SHEET _____	QTR. _____	BLOCK _____	PARCEL _____	OWN _____
DEED BOOK _____ PAGE _____									
RECORDING DATE ____/____/____	TYPE OF INSTRUMENT CR _____ RA _____ DE _____	SPLIT <input type="checkbox"/>	MO _____	YR _____	TY _____	AMOUNT \$ _____	S _____	V _____	
		MULTI <input type="checkbox"/>							

SELLER (Grantor) NAME _____ MAILING _____ CITY/ST/ZIP _____ PHONE NO. (____) _____	BUYER (Grantee) NAME _____ MAILING _____ CITY/ST/ZIP _____ PHONE NO. (____) _____
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**IF AGENT SIGNS FORM, BOTH BUYER AND SELLER TELEPHONE NUMBERS MUST BE ENTERED.**

BRIEF LEGAL DESCRIPTION _____ _____ _____	Property / Situs Address: _____ Name and Mailing Address for Tax Statements _____ _____
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**CHECK ANY FACTORS THAT APPLY TO THIS SALE:** (See Instructions on back of form.)

1. SPECIAL FACTORS
  - Sale between immediate family members:  
SPECIFY THE RELATIONSHIP \_\_\_\_\_
  - Sale involved corporate affiliates belonging to the same parent company
  - Auction Sale
  - Deed transfer in lieu of foreclosure or repossession
  - Sale by judicial order (by a guardian, executor, conservator, administrator, or trustee of an estate)
  - Sale involved a government agency or public utility
  - Buyer (new owner) is a religious, charitable, or benevolent organization, school or educational association
  - Buyer (new owner) is a financial institution, insurance company, pension fund, or mortgage corporation
  - Would this sale qualify for one of the exceptions listed on the reverse side of this form? (Please indicate # \_\_\_\_\_)
  - Sale of only a partial interest in the real estate
  - Sale involved a trade or exchange of properties
  - NONE OF THE ABOVE

2. CHECK USE OF PROPERTY AT THE TIME OF SALE:
 

<input type="checkbox"/> Single Family Residence	<input type="checkbox"/> Agricultural Land
<input type="checkbox"/> Farm/Ranch With Residence	Mineral Rights Included?
<input type="checkbox"/> Condominium Unit	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Vacant Land	<input type="checkbox"/> Apartment Building
<input type="checkbox"/> Other: (Specify) _____	<input type="checkbox"/> Commercial/Industrial Bldg.

3. WAS THE PROPERTY RENTED OR LEASED AT THE TIME OF SALE?  YES  NO

4. DID THE SALE PRICE INCLUDE AN EXISTING BUSINESS?  YES  NO

5. WAS ANY PERSONAL PROPERTY (SUCH AS FURNITURE, EQUIPMENT, MACHINERY, LIVESTOCK, CROPS, BUSINESS FRANCHISE OR INVENTORY, ETC.) INCLUDED IN THE SALE PRICE?  YES  NO  
If yes, please describe \_\_\_\_\_

Estimated value of all personal property items included in the sale price \$ \_\_\_\_\_  
If Mobile Home Year \_\_\_\_\_ Model \_\_\_\_\_

6. ARE YOU AWARE OF ANY CHANGES IN THE PROPERTY SINCE JAN. 1?  YES  NO  
 Demolition  New Construction  Remodeling  Additions  
Date Completed \_\_\_\_\_

7. WERE ANY DELINQUENT TAXES ASSUMED BY THE PURCHASER?  YES  NO AMOUNT \$ \_\_\_\_\_

8. METHOD OF FINANCING (check all that apply):  
 New loan(s) from a Financial Institution  
 Seller Financing  Assumption of Existing Loan(s)  
 All Cash  Trade of Property  Not Applicable

9. WAS THE PROPERTY MADE AVAILABLE TO OTHER POTENTIAL PURCHASERS?  YES  NO If not, explain \_\_\_\_\_

**(SEE #9 INSTRUCTION ON BACK)**

10. DOES THE BUYER HOLD TITLE TO ANY ADJOINING PROPERTY?  YES  NO

11. ARE THERE ANY FACTS WHICH WOULD CAUSE THIS SALE TO BE A NON-ARMS LENGTH / NON-MARKET VALUE TRANSACTION? (SEE #11 INSTRUCTION ON BACK)  YES  NO

12. TOTAL SALE PRICE \$ \_\_\_\_\_  
DEED DATE \_\_\_\_/\_\_\_\_/\_\_\_\_

13. I CERTIFY THAT THE ADDRESS TO WHICH TAX STATEMENTS FOR THE PROPERTY ARE TO BE SENT IS CORRECT. I ALSO CERTIFY I HAVE READ ITEM NO. 13 ON THE REVERSE SIDE AND HEREBY CERTIFY THE ACCURACY OF THE INFORMATION AND THAT I AM AWARE OF THE PENALTY PROVISIONS OF K.S.A. 79-1437g.

PRINT NAME \_\_\_\_\_

SIGNATURE \_\_\_\_\_

GRANTOR (SELLER)  GRANTEE (BUYER)  
 AGENT DAYTIME PHONE NO. (\_\_\_\_) \_\_\_\_\_