

**LANCASTER MLS
CHANGE AUTHORIZATION FORM**

Date: _____

MLS # _____

Address: _____

City: _____

Zip Code: _____

Company: _____

Agent: _____

Submitted by: _____ (Signature of Realtor)

PRICE CHANGE/LISTING EXTENTION OR WITHDRAWAL

Change Price to \$ _____

Extend Date to: _____

Withdraw listing as of: _____

CLOSING INFORMATION

The following information must be completed on SOLDS

Selling Price \$ _____

In Contract Date _____

Sold Date: _____

Selling Agent: _____

Selling Office: _____

HOW SOLD (check one)

- | | |
|------------------------------|----------------|
| <input type="checkbox"/> OT | Other |
| <input type="checkbox"/> CNV | Conventional |
| <input type="checkbox"/> FHA | FHA |
| <input type="checkbox"/> VA | VA |
| <input type="checkbox"/> ASM | Assumption |
| <input type="checkbox"/> CSH | Cash |
| <input type="checkbox"/> OWF | Owner Finance |
| <input type="checkbox"/> PRV | Private |
| <input type="checkbox"/> LSE | Lease Purchase |

OTHER CHANGES:

Use this space to make any changes not covered above.

