

MERIDIAN SERVICE METROPOLITAN DISTRICT

c/o COMMUNITY RESOURCE SERVICES OF COLORADO (CRS) 7995 E. PRENTICE AVE, SUITE 103E, GREENWOOD VILLAGE, CO 80111 303-381-4960 / 719-495-5152 / www.meridianservice.org

CLOSING & ESCROW INSTRUCTIONS

Please use this form for all real estate transaction or changes in ownership within Meridian Service Metropolitan District boundaries.

TO BE COMPLETED BY TITLE COMPANY

Complete this section and email to billing@crsofcolorado.com, or you may fax to 303-381-4961.

CRS will complete the bottom of the form and send it back by email. A Final Bill will be sent to the Title Company.

PROCESSING TIME: A minimum of 48 hours

- CLOSING CANCELLATIONS: Please contact our office immediately

DATE OF REQUEST:	TITLE COMPANY N	IAME:	
DATE OF CLOSING:	PHONE:	EMAIL:	
EMAIL OR MAILING ADDRESS FOR FINAL BILL:	CONTACT NAME:		
PROPERTY ADDRESS:			
SELLER NAME:	Phone:		
Email: Forwar	ding Address:		
BUYER NAME:	Phone:		
Email:			
Is this an Owner-Occupied Property? YES		billing address:	

IMPORTANT INFORMATION:

- 1. MSMD charges a \$60 Transfer Fee, which is inclusive of the "Estimated Additional Due Through Closing".
- 2. For each day beyond the scheduled closing date, add \$15.00* (see below). If more than 10 days, a new form must be completed and submitted to CRS.
- 3. CRS will send a Final Bill to the Title Company once the closing is confirmed, and the Final Bill is Complete.
- 4. DO NOT pay from this form.

6	0	
	TO BE COMPLETED BY CRS	
WATER/SEWER ACCOUNT INFORMATION:		
Account #:	Current Account Balance as of: \$:	
	Est Addl Due Through Closing on: \$:	
Current Billing Cycle: to	(Closing Date) (Includes \$60 Transfer Fee)	
Next Billing Date:	Amount to Escrow: \$	-

*(For Title Use Only): Please add to the "Amount to Escrow", if applicable: \$15/day x #______ of Days: \$______