

Leasehold Improvement Exchange Worksheet

Exchangor/Taxpayer Information:

Name:			
Individual(s)			
□ Partnership □ Corporation	🗆 Other		
State of formation:			
Authorized / Contact P	erson:		
Title:			
Mailing Address:			
Phone:	Email:		
Affiliate / Titleholder Informati	ion:		
\square Individual \square Corporation \square	Partnership 🛛 Other		
Name:		State of formation	
To-Be-Improved Property Infor	rmation		
Address or Legal Description:			
County:	State:	Date acquired by Affiliate:	
Brief description of improveme	nts to be made		
Estimated value of improveme	nts		
Relinquished Property Informa	tion:		
Address or Legal Description:			
County:	State:	Expected Close Date:	
Estimated amounts if leaving			
Estimated amounts, if known:	Expected Sale Price:		
	Mortgage Payoff:		
Please confirm that the Relinguvacation home, or second hom		urrently being used as a primary Confirmed	residence,
Data can be typed directly into this form.			Page 1 of 2



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Relinquished Property Escre	<u>ow / Closer, if known:</u>	
Company Name:		
Contact Name:	File #	
Phone:	Email:	
Exchangor's Legal & Tax Ad	lvisor, if any:	
Attorney Firm Name:		
Contact Name:		
Phone:	Email:	
Accountant/CPA Firm Nam	ne:	
Contact Name:		
Phone:	Email:	
Replacement Property Lend	ler, if any:	
Firm Name:		
Contact Name:		
Phone:	Email:	
Exchangor's Realtor, if any:	L	
Firm Name:		
Contact Name:		
Phone:	Email:	