

CRITICAL DATE LIST

Updated: February 2016

SELLER

BUYER

PREMISES ADDRESS

CITY, AZ ZIP CODE

ESCROW OFFICER

ESCROW NUMBER

ESCROW COMPANY

ESCROW OFFICER PHONE

ESCROW OFFICER EMAIL

ESCROW OFFICER FAX

LISTING AGENT NAME

LISTING AGENT PHONE

LISTING AGENT COMPANY

LISTING AGENT EMAIL

SELLING AGENT NAME

SELLING AGENT PHONE

SELLING AGENT COMPANY

SELLING AGENT EMAIL

LOAN OFFICER

LOAN OFFICER PHONE

LENDER COMPANY NAME

LOAN OFFICER EMAIL

This is a Critical Date List for the transaction listed above as of this date: _____

ACTIONS:	DUE DATE:	DATE COMPLETED:
1. Mutual Acceptance of Purchase Contract:		
<input checked="" type="checkbox"/> 2. Buyer to deposit Earnest Money with Escrow Company:	<u>Upon Acceptance</u>	
<input checked="" type="checkbox"/> 3. Buyer to provide lender with Loan Application (within 3 days after Contract acceptance):		
<input checked="" type="checkbox"/> 4. Buyer to grant lender permission to access Credit Report (within 3 days after Contract acceptance):		
<input checked="" type="checkbox"/> 5. Seller to deliver SPDS (within 5 days after Contract acceptance):		
<input checked="" type="checkbox"/> 6. Seller to deliver Insurance Claims History (within 5 days after Contract acceptance):		
7. Buyer to receive Loan Estimate (LE):		
<input checked="" type="checkbox"/> 8. Seller to notify HOA of pending sale if over 50 units (5 days after Contract acceptance):		
<input checked="" type="checkbox"/> 9. Buyer to receive required HOA disclosures (10 days after Contract acceptance if less than 50 units) (10 days after HOA's receipt of notice if 50 or more units):		
<input checked="" type="checkbox"/> 10. Buyer to supply LSU (within 10 days after Contract acceptance):		
11. Buyer to provide notice of any items disapproved within the SPDS (5 days after receipt/Inspection Period):		
12. Buyer to provide notice of any items disapproved within the Insurance Claims History (5 day after receipt/Inspection Period):		
13. Buyer to apply for Homeowners Insurance (Inspection Period):		
14. Buyer to order Termite or Insect Inspection (Inspection Period):		

☒ CURE NOTICE

Premises Address: _____

ACTIONS:	DUE DATE:	DATE COMPLETED:
15. Buyer to deliver Inspection Notice (Inspection Period):	_____	_____
16. Seller to deliver response to Buyer's Inspection Notice (5 days after receipt):	_____	_____
17. Buyer to deliver reply to Seller's Inspection Notice response (5 days after receipt):	_____	_____
<input checked="" type="checkbox"/> 18. Buyer to provide lender with Notice of Intent to Proceed with loan (within 10 days of receipt of LE):	_____	_____
<input checked="" type="checkbox"/> 19. Buyer to provide lender all requested signed disclosures and documentation listed in LSU at lines 32-35 (within 10 days of receipt of LE):	_____	_____
20. Buyer's disapproval of Title Commitment/Sch. B, etc. (5 days after receipt):	_____	_____
21. Buyer's disapproval of HOA documents (5 days after receipt):	_____	_____
22. Buyer may cancel in the event of low appraisal (5 days after notice):	_____	_____
23. Buyer's Homeowners Insurance in place (COE):	_____	_____
24. Buyer to perform Walkthrough(s):	_____	_____
25. Buyer to receive Closing Disclosure (CD) (no later than 3 business days prior to signing):	_____	_____
<input checked="" type="checkbox"/> 26a. Buyer to sign Loan Documents (no later than 3 days prior to COE):	_____	_____
-OR-		
<input checked="" type="checkbox"/> 26b. Buyer to deliver Notice of Loan Approval without PTD conditions AND date(s) of CD receipt from lender (no later than 3 days prior to COE):	_____	_____
-OR-		
<input checked="" type="checkbox"/> 26c. Buyer to deliver Notice of Inability to Obtain Loan Approval without PTD conditions (no later than 3 days prior to COE):	_____	_____
<input checked="" type="checkbox"/> 27. Buyer to have funds in Escrow to allow COE on COE Date:	_____	_____
<input checked="" type="checkbox"/> 28. Seller to complete repairs (if any) / receipts to Buyer (3 days prior to COE):	_____	_____
<input checked="" type="checkbox"/> 29. Recordation of Documents (COE):	_____	_____
<input checked="" type="checkbox"/> 30. Seller to deliver possession, existing keys, security system/alarms, mailbox, etc. (COE):	_____	_____
OTHER ACTIONS REQUIRED SPECIFIC TO TRANSACTION:	DUE DATE:	DATE COMPLETED:
<input checked="" type="checkbox"/> 31. Seller to deliver AAR DWWA SPDS (5 days after Contract acceptance):	_____	_____
<input checked="" type="checkbox"/> 32. Buyer to provide notice of any items disapproved within the DWWA SPDS (5 days after receipt):	_____	_____
<input checked="" type="checkbox"/> 33. Seller to deliver ADWR Registration of Existing Well (5 days after Contract acceptance):	_____	_____
<input checked="" type="checkbox"/> 34. Buyer to respond to ADWR Registration of Existing Well (5 days after receipt):	_____	_____
<input checked="" type="checkbox"/> 35. Seller to have On-Site Wastewater Treatment Facility inspected (3 days prior to COE):	_____	_____
<input checked="" type="checkbox"/> 36. Seller to deliver completed On-Site Wastewater report of inspection (upon receipt):	_____	_____
<input checked="" type="checkbox"/> 37. Buyer to deliver On-Site Wastewater Treatment Facility Ownership Transfer Doc (prior to COE):	_____	_____
<input checked="" type="checkbox"/> 38. Seller to deliver Lead Based Paint Information (5 days after Contract acceptance):	_____	_____
<input checked="" type="checkbox"/> 39. Buyer to respond to Lead Based Paint Disclosure (5 days after receipt):	_____	_____
<input checked="" type="checkbox"/> 40. Seller to deliver Affidavit of Disclosure (5 days after Contract acceptance):	_____	_____
<input checked="" type="checkbox"/> 41. Buyer to provide notice of any Affidavit of Disclosure items disapproved (5 days after receipt):	_____	_____
42. Buyer to receive Flood Status Report:	_____	_____
43. <input type="checkbox"/> Buyer <input type="checkbox"/> Seller to order Home Warranty Plan:	_____	_____
44. Other:	_____	_____

☒ **CURE NOTICE**

CURE NOTICE ACTIVATED

Date: _____

Reason: _____

Cure Deadline: _____ Date Cured: _____ or Date Cancelled: _____

Date: _____

Reason: _____

Cure Deadline: _____ Date Cured: _____ or Date Cancelled: _____

Date: _____

Reason: _____

Cure Deadline: _____ Date Cured: _____ or Date Cancelled: _____
