



MCDUFFY LAW FIRM, PLLC

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Please complete this questionnaire as completely and accurately as you can. All information that you provide will be held in strict confidence. Please use additional sheets, if necessary.

NEW CLIENT REFINANCE FORM

Today's Date: _____

Your Full Legal Name: _____

Other Names Used in the Past: _____

Street Address: _____

City: _____ County: _____ State: _____ Zip Code: _____

Mailing Address if Different Than Above: _____

Last 4 of Social Security no. _____

Phone: Home (____) ____ - ____ Cell (____) ____ - ____

Email Address: _____

By providing my email address I authorize that the McDuffy Law Firm, PLLC may send me emails concerning my case.

May we contact you concerning your case via: ___Phone ___Text Message ___Email ___

Marital status: ___Married ___Single

Spouse full legal name: _____

Last 4 of Spouse's Social Security No: _____ Phone number _____

Is the property part of a Home Owners Association? ___No ___Yes; If yes please provide contact information (ie: Name, phone number, email etc...) _____

Does the property have a mortgage or deed of trust? ___Yes ___No

Mortgage/bank contact information: _____

Loan Number(s): _____

Do you authorize our office to obtain loan information from your lender including but not limited to a payoff statement? ___Yes ___No

PLEASE ACKNOWLEDGE EACH OF THE FOLLOWING IMPORTANT STATEMENTS & SIGN BELOW:

- I have completed this form as fully and accurately as possible and have not knowingly provided any false statements.
- I understand that my initial consultation or strategy session fee is due at the end of the appointment unless other arrangements are made prior to my session.
- I understand that this form is for informational and assessment purposes only, it is not a contract for legal services, and does not constitute an agreement to represent me. Representation, if so desired, shall be provided upon the execution of a formal written client agreement and payment of a deposit or fee.

Signature

Date