

# Lawyers Equity Exchange

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## **1031 EXCHANGE START FORM**

**To initiate your exchange transmit the following to LEX**

FAX: (415) 701-1236 Attn: Brian Fogarty

Items 1 - 8 pertain to initiating the exchange

Item 9 should be submitted when the replacement property is identified

### **1. Exchangor's Personal Information**

Exchangor's Name(s):			
Address:			
City:		State:	Zip:
Social Security No(s)	Exchangor 1. _____ Exchangor 2. _____		
Exchangor's Phone:		Exchangor's Fax:	
Exchangor's Cell Phone:		Email:	

### **2. Address of Each Property Being Sold (Old Property)**

Property 1 Address:			
Property 1 City:		Property 1 State:	
Property 2 Address:			
Property 2 City:		Property 2 State:	

### **3. Real Estate Agent Information**

Name:			
Phone:		Fax:	
Email:			

#### 4. Contract Information

Selling Price of Old Property 1: \$ _____	Contract Date: _____
Name(s) of Old Property 1 Buyer:	
Projected Closing Date:	
Selling Price of Old Property 2: \$ _____	Contract Date: _____
Name(s) of Old Property 2 Buyer:	
Projected Closing Date:	

#### 5. Escrow or Closing Agency where your transaction is being/will be handled

Name:			
Address:			
City:	State:	Zip:	
Phone:	Fax:		
Email:			
Escrow Officer Assigned:			Escrow Number: _____

#### 6. Accountant or Tax Advisor Information

Name:			
Address:			
City:	State:	Zip:	
Phone:	Fax:		
Email:			

## 7. Other Exchange Information

a. Will you be transferring or receiving substantial personal property in the exchange?      **YES:** \_\_    **NO:** \_\_

If YES, what value has been set for such property?

Value Transferred: \$ \_\_\_\_\_    Value Received \$ \_\_\_\_\_

b. Are you giving or receiving any promissory notes, cash or non-like-kind property in this transaction?

**YES:** \_\_    **NO:** \_\_

If so, describe: \_\_\_\_\_

## 8. When available, transmit to LEX the following documents

1. A copy of the Sales Contract for each Old Property
2. A copy of Preliminary Report on each Old Property prepared by Title Company  
(Omit Boilerplate Sections)

**END OF INITIAL INFORMATION SECTION**

**TRANSMIT TO LEX TO BEGIN EXCHANGE PROCEDURE**

NEXT SECTION FOR REPLACEMENT PROPERTY

When Replacement Propert(ies) have been identified provide:

### 9. Replacement Property Information

Property 1 Address:			
Property 1 City:		Property 1 State:	
Purchase Price of Property 1: \$	_____	Contract Date:	
Projected Closing Date:			

Property 2 Address:			
Property 2 City:		Property 2 State:	
Purchase Price of Property 2: \$	_____	Contract Date:	
Projected Closing Date:			

### Name(s) of Replacement Property Seller

Property 1:	Name 1: _____ Name 2: _____
Property 2:	Name 1: _____ Name 2: _____
Comments:	

### Escrow or Closing Agency Handling Replacement Property Transaction

Name:			
Address:			
City:		State:	Zip:
Phone:		Fax:	
Email:			
Escrow Officer:		Escrow #:	

### Sales Contract and Preliminary Report

When Available Transmit:	Copies of the <u>Sales Contract and Preliminary Report</u> for each Replacement Property (Omit Boilerplate Sections)
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>> END OF FORM Fax to (415) 701-1236 <<