

Vendor Screen Request for Add or Update of Vendors

Please provide all information that is * for the section you choose. Email form to mtgsupportcenter@flanaganstatebank.com

This request is for:	□ New Vendor	☐ Update of existing vendor
Listing Real Estate Agent		
Name *		· ·
Address *		
City, State, Zip *		
Email Address *		
Phone # *		
State License # *		
Listing Real Estate Company		
Company Name *		
Address *		
City, State, Zip *		
Email		
Phone #		
Company License # *		
Selling Real Estate Agent		
Name *		
Address *		
City, State, Zip *		
Email Address $*$		
Phone # *		
State License # *		
Selling Real Estate Company		
Company Name *		
Address *		
City, State, Zip *		
Email		
Phone Number		
Company License # *		
HOI Agent & Company		
Company Name *		
Address *		
City, State, Zip *		
Contact Name		
Phone #		
Email		
Agent Name		
License #		

Flood Insurance Company & Agent		
Company Name *		
Address *		
City, State, Zip *		
Contact Name		
Phone		
Email		
Agent Name		
	Pest/Termite Company	
Company Name *		
Address *		
City, State, Zip *		
Contact		
Phone #		
Email		
Title Company		
Company Name *		
Address *		
City, State, Zip *		
Company License # *		
Contact Name *		
Phone # *		
Email *		
Contact License # *		
The contact information for the	title company may be a general contact for the company and does	

not need to be the closer.

Notes for data entry: