



Enrollment Form

Agreement Number (provided when American Home Shield receives your application)

PROPERTY INFORMATION

3421 El Dorado Way
 Property Address to be Covered
S. Sioux City NE 68776
 City State ZIP
26 January 2020
 Listing Expiration Date (if selling) Home sq. ft.

SELLER INFORMATION

John F. Buck Lilly J. Buck
 First Name Last Name
 Phone Number Email Address
447 Fair Oaks Drive
S. Sioux City NE 68776
 Mailing Address — Only if different from covered property

BUYER INFORMATION

First Name Last Name
 Phone Number Email Address
 Mailing Address — Only if different from covered property

Total and Sign

Buyer Home Warranty	\$	<u>0</u>
Buyer Options Total	\$	<u>0</u>
Seller Coverage Option	\$	<u> </u>
Sales Tax	\$	<u>0.00</u>
Grand Total	\$	<u>0.00</u>

I accept the benefits of the American Home Shield Home Warranty coverage. I received a copy of the American Home Shield Home Warranty and understand the key terms, coverage, limitations and exclusions, and I had the opportunity to ask questions regarding such coverage.

John F. Buck
 Home Buyer or Seller Signature Date

REAL ESTATE COMPANY INFORMATION
 Initiating Real Estate Associate Buyer Seller

United Real Estate Solutions, Inc
 Real Estate Company
(712) 226-6000
 Main Office Phone Number Fax Phone Number
Mike Wojcik mikewojcik@myunitedagent.com
 Agent Name Agent Email

Cooperating Real Estate Associate Buyer Seller
United Real Estate Solutions, Inc

(712) 226-6000
 Main Office Phone Number Fax Phone Number
Mike Wojcik mikewojcik@myunitedagent.com
 Agent Name Agent Email

CLOSING COMPANY

United Escrow
 Closing Company Name
(712) 255-8015
 Main Office Phone Number Fax Phone Number

Estimated Closing Date Closing Number
 Closing Representative Name Email Address

American Home Shield may provide compensation to real estate brokers and their related companies for services provided in connection with its home warranty program. In connection with the program, a broker may provide information regarding you and your home to American Home Shield. By submitting this application, you authorize the broker to share such information with American Home Shield and authorize American Home Shield to use such information in connection with its program. You are not required to buy a home warranty and, if you want one, you are not required to buy it through a broker or sales associate.

I decline the opportunity to purchase the American Home Shield Home Warranty coverage.

Real Estate Professional Signature Date

Next Steps for: Home Buyers and Sellers

- ✔ Talk to your **real estate professional** about ordering the home warranty on your behalf.
 - ✔ **Read your Agreement** thoroughly to verify what items are covered.
 - ✔ Register for **MyAccount** at **ahs.com/myaccount** to manage your plan online.
- Request service 800.776.4663**

Real Estate Professionals

- Register for MyAccount Pro at pro.ahs.com.**
- ✔ Enter and edit **Home Warranty Plan applications.**
 - ✔ Add and edit **closing information.**
 - ✔ **Email order confirmations** and escrow information.
- Sales info 800.735.4663, ext. 1**
- Send us the enrollment application.**
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|---|---|
| Mail with Payment
AHS, P.O. Box 2803
Memphis, TN 38101 | Mail without Payment
AHS, P.O. Box 849
Carroll, IA 51401 |
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