



✓ **Revised FR/BAR Contract for Sale & Purchase**

Wednesday, July 17, 2013  
1:00 p.m. to 2:30 p.m., Q&A to follow  
\$10 SAR & SCBA Members; \$15 others

✓ **Revised FR/BAR Contract Addenda Only**

Wednesday, August 21, 2013  
Noon to 1:30 p.m., Q&A to follow  
\$10 SAR & SCBA Members; \$15 others

In July of this year, a new **Florida Realtors/ Florida Bar-2 (FR-BAR-2)** contract will be replacing the current **FR-BAR** dated 6/10. The revisions to this contract have been in the making for over two and a half years. The **FR-BAR-2** will have some significant changes you should be aware of, especially since the FR-BAR Contract has become the contract of choice for more companies and individual agents over the past several years. These significant changes include the following areas: Property Description; Occupancy and Possession; Leased Properties; Financing; Flood Zones; and FIRP-TA. In addition to these areas, there are other language changes, and some formatting changes. In addition, the **FR-BAR-2 AS IS** Contract and the parallel changes made to it will be discussed. This will be a very stimulating class, one guaranteed that you don't want to miss!

On August, 21 we will do a separate class on the FR-BAR Addenda, which will not be covered in the July 17 seminar.

Both sessions will be team taught by a Realtor and an Attorney, both of whom served on the committee that made the changes to the contract.

**Julie Horstkamp, Attorney with Berlin Patten.** Julie practices primarily in residential and commercial real estate, short sales, and title insurance.

**David Clapp, Managing Broker for RE/MAX Alliance Group.** David has been in real estate business full time for 35 years. David currently serves on the FR-BAR Contract subcommittee which was responsible for the revisions to the contract.

(Check here)  **Revised FR/BAR 7/17**  **FR/BAR Addenda 8/21**  
**\$10 SAR & SCBA Members; \$15 others**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Office \_\_\_\_\_ e-mail \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

My check for \$ \_\_\_\_\_ is enclosed or charge my VISA \_\_\_\_\_ MasterCard \_\_\_\_\_ AMEX \_\_\_\_\_

Card No. \_\_\_\_\_ Expire. Date \_\_\_\_\_ Signature \_\_\_\_\_

Pursuant to the Americans with Disabilities Act, I require specific aids or services during my visit. AUDIO VISUAL MOBILE  
Please identify your special needs: \_\_\_\_\_