

Purchaser Information Record - WORKSHEET

	MODEL NAME	FLOOR (UP TO 5 FLOOR RANGE)
CHOICE # 1		TO
CHOICE # 2		TO
CHOICE # 3		TO
CHOICE # 4		TO

PRIMARY PURCHASER

****All fields mandatory and MUST be complete****

First, Middle & Last Name _____

Address _____ Suite # _____

City _____ Postal Code _____

Home Phone _____

Cell Phone _____

Work Phone _____

Email Address _____

Date of Birth: (M/D/Y) _____ S.I.N. _____

Drivers License # _____

Occupation _____

SECONDARY PURCHASER

First, Middle & Last Name _____

Address _____ Suite # _____

City _____ Postal Code _____

Home Phone _____

Cell Phone _____

Work Phone _____

Email Address _____

Date of Birth: (M/D/Y) _____ S.I.N. _____

Drivers License # _____

Occupation _____

******* OFFICE USE ONLY *******

Tower: SKY Suite No.: _____ Unit _____ Level _____ Model: _____

DATE: Saturday, November 3, 2012

PURCHASE PRICE SUMMARY:

UNIT PRICE: \$ _____

Mortgage Approval Receive: Yes / No (% _____)

DEPOSIT SUMMARY:

1ST DEPOSIT: \$2,000.00 WITH AGREEMENT

2ND DEPOSIT: \$ _____ DATE: December 3, 2012

3RD DEPOSIT: \$ _____ DATE: March 3, 2013

4TH DEPOSIT: \$ _____ DATE: November 3, 2013

TOTAL DEPOSIT AMOUNT: \$ _____

DUE ON OCCUPANCY: \$ _____ **TOTAL DEPOSIT %** 20

ALL DEPOSIT CHEQUES PAYABLE TO "HARRIS SHEAFFER, LLP in TRUST"

----- AGENT INFORMATION -----



Ken Yeung
Sales Representative
Centurion Award Winner



Leading Edge Realty Inc.
Brokerage The Local Experts
1053 McNicoll Ave.
Toronto, ON M1W 3W6
Office : 416-494-5955 (24 Hr.)
Fax : 416-494-4977
Cell : 416-618-9890
Email: Ken.yeung@century21.ca
Web: www.kenyeung.ca

*Independently Owned and Operated

New Condos & Residential

Brokerage Name Century 21 Leading Edge Realty Inc., Brokerage

Sales Representative Ken Yeung

Office/ Cell Phone: (416) 494-5955 / (416) 618-9890

Internal Office – Please sign to verify receipt

TFN Sales Rep: _____ Administrator: _____ Date: _____ Time: _____