

# WORKSHEET



DATE: \_\_\_\_\_ SALESPERSON: \_\_\_\_\_  
SUITE: \_\_\_\_\_ SOURCE: \_\_\_\_\_  
UNIT: \_\_\_\_\_ Level: \_\_\_\_\_ MODEL: \_\_\_\_\_

Suite Price \_\_\_\_\_ Parking  Yes /  No Locker  Yes /  No  
TOTAL PRICE \_\_\_\_\_

## Purchaser's Information

*FIRST NAME _____	FIRST NAME _____
*LAST NAME _____	LAST NAME _____
SIN # or driver's license incl. expiry date _____	SIN # or driver's license incl. expiry date _____
*DOB (MM/DD/YY) _____	DOB (MM/DD/YY) _____
*ADDRESS _____	ADDRESS _____
*CITY _____	CITY _____
*POSTAL CODE _____	POSTAL CODE _____
*PRINCIPAL BUSINESS OR OCCUPATION: _____	PRINCIPAL BUSINESS OR OCCUPATION: _____
*HOME: _____	HOME: _____
OFFICE: _____	OFFICE: _____
*E-MAIL: _____	E-MAIL: _____

\*Mandatory fields.

### Special Instructions/Notes

FOR OFFICE USE, DO NOT WRITE BELOW THIS LINE

**DEPOSITS:**

1<sup>st</sup> DEPOSIT: \$5,000 ON SIGNING \_\_\_\_\_

2<sup>nd</sup> DEPOSIT: \_\_\_\_\_ BALANCE OF 5% IN 30 DAYS \_\_\_\_\_

3<sup>rd</sup> DEPOSIT: \_\_\_\_\_ 5% IN 90 DAYS \_\_\_\_\_

4<sup>th</sup> DEPOSIT: \_\_\_\_\_ 5% IN 180 DAYS \_\_\_\_\_

5<sup>th</sup> DEPOSIT: \_\_\_\_\_ 5% IN 365 DAYS \_\_\_\_\_

6<sup>th</sup> DEPOSIT: \_\_\_\_\_ 5% ON OCCUPANCY \_\_\_\_\_

PLEASE MAKE ALL CHEQUES PAYABLE TO: GOLDMAN, SPRING, KICHLER & SANDERS LLP in Trust



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