

WORKSHEET

PURCHASER 1:			D.O.B. (____/____/____)
ADDRESS:	CITY:	POSTAL CODE: _____	
PHONE (SMS):	HOME:	WORK: _____	
E-MAIL:			
PURCHASER 2:			D.O.B. (____/____/____)
ADDRESS:	CITY:	POSTAL CODE: _____	
PHONE (SMS):	HOME:	WORK: _____	
E-MAIL:			

FINTRAC INFORMATION:

PURCHASER 1 OCCUPATION: _____ EMPLOYER: _____

IDENTIFICATION #: _____ ID TYPE: _____ EXP: _____

PURCHASER 2 OCCUPATION: _____ EMPLOYER: _____

IDENTIFICATION #: _____ ID TYPE: _____ EXP: _____

PROJECT INFORMATION:

VENDOR: ROSEHAVEN HOMES LIMITED

REAL ESTATE BROKER: SPECTRUM REALTY SERVICES INC. SITE STAFF: INNA SEMIKOLENNIHA

OPTION #1

LOT NUMBER: _____
 MODEL: _____ ELEV: _____
 SQ FOOTAGE: _____ PRICE: _____

OPTION #2

LOT NUMBER: _____
 MODEL: _____ ELEV: _____
 SQ FOOTAGE: _____ PRICE: _____

OPTION #3

LOT NUMBER: _____
 MODEL: _____ ELEV: _____
 SQ FOOTAGE: _____ PRICE: _____

OPTIONS:	DEPOSITS:	DATE:	AMOUNT:
	INITIAL DEPOSIT W/AGMT		\$ 25,000.00

CO-BROKER INFORMATION:

Agent Name: _____
 Brokerage Name: _____
 Address: _____
 City: _____
 Postal: _____
 Business Telephone: _____
 Agent's E-mail: _____

ATTACH BUSINESS CARD