



WORKSHEET

Date of Offer: Sept 13

Salesperson: Danielle / Sonny

Suite Number: _____

Tower: _____

Floorplan: _____

Level No.: _____

Legal: _____

PURCHASE PRICE & DEPOSITS:

Purchase Price: \$ _____

1st Deposit: \$2,000.00 with Agreement

2nd Deposit: Total to 5% in 30 days \$ _____

3rd Deposit: 5% in 90 days \$ _____

4th Deposit: 5% in 120 days \$ _____

5th Deposit: Total to 20% on occupancy \$ _____

SPECIAL INSTRUCTIONS – AMENDMENTS, ADDENDUMS, CONDITIONS:

5% - 60 days
5% - 365 days

PURCHASER #1

DIANE ABUNASRIEH
First, Middle & Last Name

82108196691372008 556358190
Date of Birth: (M/D/Y) S.I.N.

A1074-60566-41208
Drivers License #

5196 Brockworth Dr.
Address Suite #

Mississauga L5V 1S3
City Postal Code

905-286-9809 416-616-1585
Residence Phone Business Phone

905-2483378
Fax Number

pharmarite@aol.com
Email Address

PURCHASER'S SOLICITOR

Solicitor's Name

Address

City

Phone Number

Fax Number

Firm

Suite No.

Postal Code

Email

PLEASE MAKE CHEQUES PAYABLE TO HARRIS, SHEAFFER, LLP in Trust

PURCHASER PROFILE: to be completed by agent/sign-up person

Did you register through the Web?

End User or Investor?

How did you hear about us?

Profession:

How many dependents are living with you?

Dependents Ages:

Marital Status:

Exclusive Broker: indition
NATION | MARKETING INSIGHTS



A M A C O N
L I V E W E L L