THE GRAND RESIDENCES AT PARKSIDE VILLAGE

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# GRAND OPENING WORKSHEET

**Date of Offer:** Jul 19/08 **Salesperson:** Daniella

**Suite Number:** 711 **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 | $_____ | Date: _____ |
| **3rd Deposit:** | 5% in 90 days | $_____ | Date: _____ |
| **4th Deposit:** | 5% in 120 days | $_____ | Date: _____ |
| **5th Deposit:** | Total to 20% on occupancy | | |

**SPECIAL INSTRUCTIONS – AMENDMENTS, ADDENDUMS, CONDITIONS:**

**PURCHASER #1**

LENFORD AUGUSTUS COUNSELL
First, Middle & Last Name

DEC. 07. 50 — Date of Birth: (M/D/Y)
248-915-373 — S.I.N.

C6815-45715-01207
Drivers License #

3233 TOPEKA DRIVE
Address — Suite #

MISSISSAUGA — City
L5M-7V1 — Postal Code

905-542-3803 — Residence Phone
905-279-3220 — Business Phone

905-279-7644
Fax Number

Lenny counsell@hotmail.com
Email Address

**PURCHASER #2**

MARCIA EVETTA COUNSELL
First, Middle & Last Name

JUNE 19, 1954 — Date of Birth: (M/D/Y)
486818552 — S.I.N

C6815-51735-45619
Drivers License #

3233 Jopeka Dr
Address — Suite #

Mississauga — City
L5M 7V1 — Postal Code

Ontario — Residence Phone
9058193000 4708 — Business Phone

_____
Fax Number

GlaxoSmithKline
Email Address

**PURCHASER'S SOLICITOR**

_____ — Solicitor's Name
_____ — Firm
_____ — Address
_____ — Suite No.
_____ — City
_____ — Postal Code
_____ — Phone Number
_____ — Fax Number
_____ — 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: inEdition — INZITION | MARKETING INSIGHTS

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