Date of Offer:

MANUAL AND -12 INZITION Salesperson:

1 3 Han

End User or Investor? Profession: Service Log Dependents Ages: Marital Status:	Did you register through the Web? How did you hear about us? How many dependents are living with you?
TOTALIS THE SECOND	3
Email	Phone Number Fax Number
Postal Code	City
Suite No.	Address
Firm	Solicitor's Name
	PURCHASER'S SOLICITOR
Sebgalvipin@gmail.com	Sonia un 97@ g mail. Com Email Address
Fax Number	Fax Number
289-232-6633 Residence Phone Business Phone	289-232-6633 Residence Phone Business Phone
MISSISSAUGA LSV2M6 City Postal Code	MISSISSAUGA L5V2M6 City Postal Code
5223 Fairford Cres. #18 Address Suite#	5223 Fairford Cres. #18 Address Suite #
52241-77106-90908 2012/09/14 Drivers License # Expiry Date	52241-71907-35710 2015/11/25 Drivers License #
09-08-69 Date of Birth: (M/D/Y) S.I.N	07-10-73 Date of Birth: (M/D/Y) S.I.N.
VIPIN SEHGAL First, Middle & Last Name	SONIA SEHGAL First, Middle & Last Name
PURCHASER #2	PURCHASER #1
SPECIAL INSTRUCTIONS - AMENDMENTS, ADDENDUMS, CONDITIONS:	PLEASE MAKE CHEQUES PAYABLE TO HARRIS, SHEAFFER LLP IN TRUST
Date:	
Date:	4 th Deposit: 5% in 1/20 days \$
Date:	3 rd Deposit: 5% in 90 days
Date:	2 nd Deposit: Balance to 5% in 30 days \$
	1 st Deposit: \$2,000.00 with Agreement
	Purchase \$ 226,400
	PURCHASE PRICE & DEPOSITS:
Floorplan: TWIP Level No.: Unit No.	Suite Number: 702 Tower: S