



**PARKSIDE
VILLAGE®**
MISSISSAUGA

PURCHASER INFORMATION FORM

Suite #: Cell, BNN.

Purchasers
Name(s): Chok-Ming Gally Wong.

Purchasers
Address: _____

Tel:
(Daytime): _____

(Cell): (647) 667-6977

Email
Address: _____

PURCHASER'S SOLICITOR INFORMATION

Name: Imran Akram

Firm: _____

Address: 206-4275 Village Center Crt, Mississauga.
L4Z 1V3

Tel: (289) 814-2944

Fax: (289) 814-2942

Email: Imran@akram

Q NORTH #611

Please return the completed form to:

PARKSIDE VILLAGE SALES TEAM

465 Burnhamthorpe Road West | Mississauga | ON | L5B 0E3 | 905.273.9333
FAX: 905-273-7772 EMAIL: SUPPORT1@LIFEATPARKSIDE.COM
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