

PURCHASER INFORMATION FORM



**PARKSIDE
VILLAGE®**
MISSISSAUGA

Suite #: 3302, PSV1

Purchasers
Name(s): Araz Yousif Sairoob Akoob.

Purchasers
Address: _____

Tel:
(Daytime): _____

(Cell): (647) 780-8173.

Email
Address: _____

PURCHASER'S SOLICITOR INFORMATION

Name: John Sedrak

Firm: Nomos

Address: 701-50 Burnhamthorpe rd W.
Mississauga. L5B 3C8.

Tel: (905) 232-1529

Fax: (905) 232-3323.

Email: _____

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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