

DATE
03/06/2021

TIME
09:48 am

INITIALS SALES REPRESENTATIVE NAME:

BROKER DETAILS

PRIMARY AGENT FIRST NAME:
Brigitte

PRIMARY AGENT LAST NAME:
Obregon

PRIMARY AGENT EMAIL:
info@gta-homes.com

PRIMARY AGENT PHONE:
4162588493

PRIMARY AGENT BROKERAGE:
Remax Ultimate - GTA-Homes

SECONDARY AGENT FIRST NAME:
Sohail

SECONDARY AGENT LAST NAME:
Shah

SUITE PREFERENCE

FLOOR PREFERENCE
Low

MODEL NAME
Urban

FLOOR PREFERENCE
Low

2ND MODEL NAME
Oak

PURCHASER INFORMATION

PURCHASER SURNAME/LAST NAME:
Saini

PURCHASER FIRST/GIVEN NAME: (MR. MRS. MS.)
Sushil

ADDRESS:
5730 Macphee Rd

CITY:
Mississauga

COUNTRY
Canada

POSTAL CODE:
L5M7B2

RESIDENCE PHONE:
6473388386

CELL PHONE:
(647) 338-8386

EMAIL:
sushilsaini13@gmail.com

EMPLOYER
Intact Insurance

OCCUPATION
Claims Representative

DATE OF BIRTH:
02/13/1955

FRONT OF DRIVER'S LICENSE
• Sushil-Drivers-Licence.pdf

BACK OF DRIVER'S LICENSE
• Sushil-Drivers-Licence1.pdf

SECOND PURCHASER INFORMATION

PURCHASER SURNAME/LAST NAME:
Saini

PURCHASER FIRST/GIVEN NAME: (MR. MRS. MS.)
Shobha

ADDRESS:
5730 Macphee Rd

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