

PURCHASER INFORMATION WORKSHEET



MUST BE FILLED IN ELECTRONICALLY

Date: \_\_\_\_\_, 20 \_\_\_\_\_ Sales Representative: \_\_\_\_\_

Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Street: \_\_\_\_\_

|                                      |              |                  |
|--------------------------------------|--------------|------------------|
| 1st selection:                       | Model: _____ | Elevation: _____ |
| 2nd selection:                       | Model: _____ | Elevation: _____ |
| 3rd selection:                       | Model: _____ | Elevation: _____ |
| Optional Floor Plan: _____ YES or NO |              |                  |
| Preferred Lots: _____                |              |                  |

|                        |          |
|------------------------|----------|
| 1ST Model Price:       | \$ _____ |
| Opt. Floor Plan Price: | \$ _____ |
| Lot Premium Price:     | \$ _____ |
| Total Purchase Price:  | \$ _____ |

1st Tentative close date: \_\_\_\_\_

**Purchaser Name:** \_\_\_\_\_

Profession: \_\_\_\_\_

|                        |                   |
|------------------------|-------------------|
| Residence Phone: _____ | Cell Phone: _____ |
| Business Phone: _____  | Other: _____      |
| Drivers Licence: _____ | _____             |

E-mail Address: \_\_\_\_\_

**Purchaser Name:** \_\_\_\_\_

Profession: \_\_\_\_\_

|                        |                   |
|------------------------|-------------------|
| Residence Phone: _____ | Cell Phone: _____ |
| Business Phone: _____  | Other: _____      |
| Drivers Licence: _____ | _____             |

E-mail Address: \_\_\_\_\_

**Purchaser Name:** \_\_\_\_\_

Profession: \_\_\_\_\_

|                        |                   |
|------------------------|-------------------|
| Residence Phone: _____ | Cell Phone: _____ |
| Business Phone: _____  | Other: _____      |
| Drivers Licence: _____ | _____             |

E-mail Address: \_\_\_\_\_

**Co-Operating Brokerage Information:** \_\_\_\_\_

Agent: \_\_\_\_\_

Brokerage: \_\_\_\_\_

Address: \_\_\_\_\_

Office #: \_\_\_\_\_

Fax #: \_\_\_\_\_ Cell #: \_\_\_\_\_

email: \_\_\_\_\_

Commission: 2.00% Notes: net of HST

IN ADDITION MUST ATTACH THE FOLLOWING WITH THE WORKSHEET:

COLOUR copy of Government issued VALID ID

COPY of 1st deposit by BANK DRAFT (Payable to : LINDSAY 2017 DEVELOPMENTS INC.)

COPY of Agent Business Card

COPY of Mortgage Approval / Commitment Letter