PURCHASER INFORMATION WORKSHEET

MUST BE FILLED IN ELECTRONICALLY



Date:	, 20	
1 at a cleation. Madel		Elevation
1st selection: Model: 2nd selection: Model:		Elevation: Elevation:
3rd selection: Model:		Floresting
Optional Floor Pla	n: YES or NO	Elevation:
Preferred Lot	C:	
1 10101100 200	·	
1ST Model Price:	\$	
Opt. Floor Plan Price:	\$ \$ \$	
Lot Premium Price:	\$	
Total Purchase Price:	\$	
	-	
MAIN CONTACT: Pu	rchaser Name:	
Profession:		
Residence Phone:		Cell Phone:
l Rijeingee Phong:		()thor:
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:
L Bucinoce Dhono:		()thor:
Drivers Licence:		
E-mail Address:		
Co-Operating Brokerage In	formation:	
Agent:		
Prokorago:		
Address:		
Office #:		
Fax #:		Cell #:
email:		

IN ADDITION MUST ATTACH THE FOLLOWING WITH THE WORKSHEET:

3.00% net of HST

COLOUR copy of Government issued VALID ID (with address)

COPY of 1st deposit by BANK DRAFT Payable to : BATAVIA DEVELOPMENTS INC.

COPY of Agent Business Card

Commission: