## **Preconstruction Worksheet**

\*Only completed worksheets will be considered

,		
Project Name:		
PLEASE INDICATE YOUR PREFERENCE:		PARKING & LOCKERS
Choice #1:		_
model	floor#	Parking (If Available)
Choice #2: model	floor #	Locker (If Available)
Choice #3:model	floor #	
PURCHASER INFORMATION: (Please enclose o	clear copy of the the purchaser identification)	
First Name:	First Name:	REQUIRED ALONG WITH
Last Name:	Last Name:	THE WORKSHEET
Address:	Address:	Please attach the below requirements with your submission
Suite#:	Suite#:	, 753. 535535
City: Province:	City: Province:	1. Images of the front & back
Postal Code:	•	of government issued ID  No Health Cards
Main Phone:	Main Phone:	Image of the first deposit
Alternate Phone:	Alternate Phone:	cheque
Date of Birth:	Date of Birth:	Payable to the Builder's Lawyer
SIN #:	SIN #:	3. Other:
Drivers License #:	Drivers License #:	
Expiry Date:	Expiry Date:	
Email:		
PURCHASER PROFILE: (To be completed by ag	gent)	
Purchaser 1 Profession:(If self employed please state what they do and title)	Employer:	
Purchaser 2 Profession:	Employer:	-
(If applicable)  Marital Status:		SUBMIT VIA EMAIL
		worksheets@royallepagesignature.com
End User Investor	Ages:	
End User investor		
COOPERATING BROKER: (Please enclose bus	ness card)	
Jeff Slightham Vice President/Broker	Name:	
8 Sampson Mews, Suite 201 Toronto, ON. M3C 0H5	☐ Don Mills ☐ Downtown  Mobile Number:	☐ Mississauga
Mobile #: 416 561 3923	Office Number:	
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