



WORKSHEET



KINGSWAY ON RIVERSIDE

	PURCHASER #1	PURCHASER #2
FIRST NAME		
LAST NAME		
ADDRESS		
SUITE #		
CITY		
POSTAL CODE		
PHONE		
EMAIL ADDRESS		
DATE OF BIRTH		
DRIVER'S LICENSE		
EXPIRY DATE		
OCCUPATION		
EMPLOYER		

	MODEL/UNIT
CHOICE #1	
CHOICE #2	
CHOICE #3	

Brokerage Name: _____
 Address: _____
 Telephone: _____
 Email: _____

Business Card

Agent Name: _____
 Agent Phone: _____
 Agent Email: _____