

WORKSHEET



Listing brokerage: Harbour Marketing



Agent Use	
Date Received:	Sales Representative:
Suite#: _____ Unit#: _____ Level 1 Model Type: Flat ☐ Mezzanine ☐	
Purchase Price:	

PURCHASER 1	PURCHASER 2
First Name:	First Name:
Last Name:	Last Name:
Company Name:	Company Name:
Address:	Address:
Suite #:	Suite #:
City: Province:	City: Province:
Postal Code:	Postal Code:
Main Phone:	Main Phone:
Date of Birth:	Date of Birth:
SIN# :	SIN# :
Profession:	Profession:
Employer:	Employer:
I.D. : Passport/ Drivers Licence/PR Card	I.D. : Passport/ Drivers Licence/PR Card
ID # :	ID # :
Expiry Date:	Expiry Date:
Email:	Email:

Please enclose 1 clear copy of the purchaser ID/ Article of Corporation	
Purchaser Profile:	
Intended Use:	
Restaurant	Non-Restaurant
End User	Investor

Cooperating Broker: Staple Agent's Business Card	
BROKERAGE NAME:	
AGENT NAME:	
CELL:	OFFICE:
ADDRESS:	

Deposit Payable to: **OWENS WRIGHT LLP, IN TRUST**