

MIB RESERVATION REQUEST FORM

ALL FIELDS ARE MANDATORY: WORKSHEETS WITH MISSING FIELDS WILL NOT BE ACCEPTED

CHOICE	MODEL NAME	TYPE	NOTES Preferred range of floors/Direction/What you want to avoid
Example	AD 15	1 Bed + Den	Not 6 th Floor. Want west view
1			
2			
3			
4			
5			

PROJECT NAME: The Social Towns at Caledon Club

HOW DID YOU HEAR ABOUT US?:

PARKING:

LOCKER:

INVESTOR:

END USER:

PURCHASER 1

FULL LEGAL NAME:

SIN #:

DOB (DD/MM/YY):

ADDRESS:

SUITE #:

CITY:

PROVINCE:

POSTAL CODE:

OCCUPATION:

COMPANY NAME:

CELLPHONE:

HOME PHONE:

OFFICE #:

EMAIL:

PURCHASER 2

FULL LEGAL NAME:

SIN #:

DOB (DD/MM/YY):

ADDRESS:

SUITE #:

CITY:

PROVINCE:

POSTAL CODE:

OCCUPATION:

COMPANY NAME:

CELLPHONE:

HOME PHONE:

OFFICE #:

EMAIL:

NOTES

VALID GOVERNMENT ISSUED PHOTO ID IS REQUIRED WITH WORKSHEET