



DANIELS ON PARLIAMENT

WORKSHEET & CHOICE OF SUITE FORM

AGENT.: _____

BROKERAGE: _____

CELL.: _____

EMAIL: _____

	MODEL	PREFERRED FLOORS	NOTES
Choice #1			
Choice #2			
Choice #3			

Suites on Level 6 are not included in this release.

PURCHASER INFORMATION

PURCHASER NAME (FIRST, LAST):		PURCHASER NAME (FIRST, LAST):	
PHONE:	Mobile ☐	PHONE:	Mobile ☐
	Home ☐		Home ☐
	Work ☐		Work ☐
EMAIL ADDRESS:		EMAIL ADDRESS:	
PROFESSION:		PROFESSION:	
DATE OF BIRTH (Y/M/D):		DATE OF BIRTH (Y/M/D):	
ADDRESS:		ADDRESS:	
SUITE #:		SUITE #:	
CITY:		CITY:	
POSTAL CODE:		POSTAL CODE:	

INTENDED NATURE OF PURCHASE: ☐ INVESTMENT

☐ PRINCIPAL RESIDENCE

*Profession must indicate title and field of work.

Note: Purchasers must have a valid photo ID. Expired ID documents are not valid. ID documents with address must reflect current address to be considered valid.