



Treasure Hil

Customer Worksheet

Agent Use

Date Received:

Time Received

Sales Representative:

Block#:

Unit #:

MODEL

#1

Please enclose 1 clear copy of the purchaser ID and 2 clear copies of their cheque

ALL Cheques MUST be payable to: **PALA BUILDERS INC.**

Purchaser 1	Purchaser 2
First Name:	First Name:
Last Name:	Last Name:
Address:	Address:
Suite #:	Suite #:
City: Province:	City: Province:
Postal Code:	Postal Code:
Main Phone:	Main Phone:
Alternate Phone:	Alternate Phone:
Date of Birth: M D Y	Date of Birth: M D Y
SIN# :	SIN# :
Profession:	Profession:
I.D. : Passport Drivers Liscence PR Card	I.D. : Passport Drivers Liscence PR Card
ID # :	ID # :
Expiry Date:	Expiry Date:
Email:	Email:

		APPROVED
Base Purchaser Price:		
Lot Premium:		
Total Purchase Price:		

Comments:

Puchaser Profile:

How did you hear about us?

How did you hear about us?

Age:

Age:

User Type: END or INVESTOR

User Type: END or INVESTOR

Cooperating Broker: Staple Agent's Business Card