



E D / T I O N

R E S I D E N C E S

Sales Advice

Edition Residences by WR Sydney – 9-25 Commonwealth Street, Sydney NSW 2000

Date:			
Agent:		Agency:	
Purchasing Entity:	<input type="checkbox"/> Individual Purchaser/s	<input type="checkbox"/> Company or Trust	<input type="checkbox"/> Power of Attorney
Purchaser Type:	<input type="checkbox"/> Owner Occupier	<input type="checkbox"/> Investor	
FIRB Required:	<input type="checkbox"/> Yes <input type="checkbox"/> No	ID Provided:	<input type="checkbox"/> Yes <input type="checkbox"/> No
PURCHASER DETAILS (As will appear on the Contract of Sale)			
Name(s):			
Full Address:			
Mobile:		Email:	
COMPANY / TRUST DETAILS			
Entity Name:			
ABN/ACN:			
TFN:			
Full Address:			
Phone:		Email:	
Guarantor:		Address:	
POWER OF ATTORNEY DETAILS			
Name:		ID Provided:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Mobile:		Email:	
PURCHASER'S SOLICITOR			
Contact:		Company:	
Full Address:			
Mobile:		Phone:	
Email:			
INITIAL DEPOSIT		PAYMENT DETAILS	
Amount:		EFT Reference:	
Date Received:		Cheque Number:	
SALE DETAILS			
Apartment Number:		Lot Number:	
Parking Space(s):	<input type="checkbox"/> Yes (number of spaces: _____) <input type="checkbox"/> No		Storage: Yes
Finishes:			
Special Conditions/Notes:			
List Price:	\$		
Final Contract Price:	\$		
Manager Approval	Johnson Yap		