

MIB RESERVATION REQUEST WORKSHEET



RE/MAX Real Estate Centre, My Investment Brokers
Real Estate Brokerage
1-702 100 City Centre Drive
Mississauga, ON
L5B 2C9
647.518.9200

All Fields Are Mandatory: Worksheets Missing Fields Will Not Be Accepted

CHOICE	MODEL NAME	TYPE	NOTES <small>Preferred Range of Floors/Direction/What You Want To Avoid</small>
Sample	AD 15	1 Bed+Den	i.e. Not 6th Floor. Want West View
1			
2			
3			
4			
5			

PROJECT NAME:

How Did You Hear About Us?

Parking Locker	Investor End User
PURCHASER 1:	PURCHASER 2:
_____	_____
FULL LEGAL NAME	FULL LEGAL NAME
_____	_____
SIN #	SIN #
_____	_____
DOB (DD/MM/YY)	DOB (DD/MM/YY)
_____	_____
ADDRESS _____ SUITE # _____	ADDRESS _____ SUITE # _____
CITY _____ PROVINCE _____	CITY _____ PROVINCE _____
POSTAL CODE _____	POSTAL CODE _____
OCCUPATION _____	OCCUPATION _____
NAME OF EMPLOYER _____	NAME OF EMPLOYER _____
CELL _____	CELL _____
HOME _____	HOME _____
OFFICE _____	OFFICE _____
E-MAIL _____	E-MAIL _____
NOTES	

VALID GOVERNMENT ISSUED PHOTO ID IS REQUIRED WITH WORKSHEET

Must Email it to Info@MyInvestmentBrokers.com, Mike@MyInvestmentBrokers.com or Hunny@MyInvestmentbrokers.com

Or Text It To 647.448.6453 / 647.284.4869