

**FRASER CAMPBELL PROPERTY MANAGEMENT LTD.**

#210-5500-152 St., Surrey, BC, V3S 5J9

Phone: (604)585-3276 Fax: (604) 585-3233 Email: info@frasercampbell.com

**INFORMATION REQUEST FORM**  
**For LAWYERS and NOTARIES**

**Please indicate when you require this information:**

- Form required within **24 hours** (additional \$200.00 rush charge plus GST)
- Form required within **2 business days** (additional \$150.00 rush charge plus GST)
- Form required within **3 business days** (additional \$100.00 rush charge plus GST)
- Form required within **4 business days** (additional \$50.00 rush charge plus GST)
- Form required by or after **5 business days** (no extra charge)

**Please indicate the information you require:**

- Form B (\$35.00 + GST)
- Form F (\$15.00 + GST)
- Other \_\_\_\_\_

**Documents ordered for:**

- SALE/PURCHASE
- TITLE TRANSFER
- RE-FINANCE
- RE-MORTGAGE

**Delivery Method:**

- EMAIL to \_\_\_\_\_  MAIL ORIGINALS?  Yes  No
- FAX to \_\_\_\_\_  MAIL ORIGINALS?  Yes  No
- PICK-UP

**Payment Options**

- Cheque
  - Visa/MasterCard
- Credit card number \_\_\_\_\_ CVV: \_\_\_\_\_ Expiry date \_\_\_\_\_
- Cardholder name \_\_\_\_\_ Cardholder signature \_\_\_\_\_

**Unit Details:**

STRATA PLAN # \_\_\_\_\_ STRATA LOT # \_\_\_\_\_ PARCEL IDENTIFIER # \_\_\_\_\_  
(Form F only)

CIVIC ADDRESS: \_\_\_\_\_  
Unit# Street City Postal Code

LEGAL DESCRIPTION \_\_\_\_\_

NON-RESIDENT OWNER'S MAILING ADDRESS: \_\_\_\_\_  
(if applicable, Form F only) Street City Postal Code

SELLER/OWNER NAME(S) \_\_\_\_\_  
(Required for all documents)

BUYER NAME(S) \_\_\_\_\_

COMPLETION DATE: \_\_\_\_\_ POSSESSION DATE: \_\_\_\_\_

**RETURN BOTH PAGES TO FRASER CAMPBELL VIA FAX: 604-585-3233 or EMAIL: info@frasercampbell.com**

**INFORMATION REQUEST FORM continued:**

**Documents Ordered By:** (all information must be completed, as applicable)

NAME: \_\_\_\_\_ COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
Street City Postal Code

PHONE NUMBER: \_\_\_\_\_ FAX \_\_\_\_\_ EMAIL \_\_\_\_\_

**Authorization/ Payment Agreement:**

I confirm that I am acting on behalf of an above-named individual(s), and as such am entitled to receive the documents and information requested.

I understand that the personal information provided above is for the purpose of complying with the legal requirements, identifying and communicating with me, and ensuring the orderly management of the Strata Corporation. I hereby authorize Fraser Campbell Property Management to collect, use, and disclose the personal information above for these purposes.

All charges are subject to GST and are due in full upon receipt of the documents(s).

\_\_\_\_\_  
Name Signature Date

**FOR OFFICE USE ONLY**

Undertaking: _____	Insurance: _____
Arrears: _____	Move in/out fee: _____
CRF: _____	Property Manager: _____
Monthly Maintenance Fee: _____	Parking _____ Locker _____

FOR OFFICE PROCESSING:

- |                                              |                                                             |
|----------------------------------------------|-------------------------------------------------------------|
| <input type="checkbox"/> Owners List Updated | <input type="checkbox"/> Welcome package sent to new owners |
| <input type="checkbox"/> Post-dated cheques  | <input type="checkbox"/> Labels                             |
| <input type="checkbox"/> PAC deleted         | <input type="checkbox"/> FCPM                               |
| <input type="checkbox"/> Form K Required     | <input type="checkbox"/> Bylaws                             |
|                                              | <input type="checkbox"/> Binder                             |