

FRASER CAMPBELL PROPERTY MANAGEMENT LTD.

#210-5500-152 St., Surrey, BC, V3S 5J9
Phone: (604)585-3276 Fax: (604) 585-3233

INFORMATION REQUEST FORM
For LAWYERS and NOTARIES

Please indicate when you require this information:

- Form required within 24 hours (additional \$150.00 rush charge plus GST)
- Form required within 2 business days (additional \$100.00 rush charge plus GST)
- Form required within 3-4 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 |