

STRATA CORPORATION
DOCUMENT ORDER FORM – Form B & F

General Information

Name of Person Requesting Document(s): _____

Company Name: _____

Company Address: _____

Phone: _____ Fax: _____ Email: _____

Property Information

Registered Owners(s) First & Last Name: _____

Building Name: _____ Building Address: _____

Strata Plan: _____ Strata Lot #: _____ Unit #: _____

Requested Documents (Check All Applicable)

- | | | | |
|----------------------------------|---|------------------------------|----------------------------------|
| Form B – Information Certificate | <input type="checkbox"/> \$35.00 | Engineering Report | <input type="checkbox"/> \$60.00 |
| Form F – Certificate of Payment | <input type="checkbox"/> \$15.00 | Depreciation Report | <input type="checkbox"/> \$60.00 |
| Registered Strata Plan | <input type="checkbox"/> \$15.00 | Current Financial Statements | <input type="checkbox"/> \$15.00 |
| Bylaws & Rules | <input type="checkbox"/> \$25.00 | | |
| Strata Minutes | <input type="checkbox"/> \$25.00 (1 Year) or, <input type="checkbox"/> \$50.00 (2 Years) or, <input type="checkbox"/> \$75.00 (3 Years) | | |

Delivery Fees (Select One)

- | | | | |
|----------------------|-----------------------------------|-------------------|-----------------------------------|
| 7 Business Days | <input type="checkbox"/> \$0.00 | 2 Business Days | <input type="checkbox"/> \$150.00 |
| 4 to 6 Business Days | <input type="checkbox"/> \$75.00 | Next Business Day | <input type="checkbox"/> \$200.00 |
| 3 Business Days | <input type="checkbox"/> \$100.00 | Same Business Day | <input type="checkbox"/> \$300.00 |

Total of All Fees: _____ (Plus Tax)

Please add all checked boxes together and enter onto the "Total of All Fees" line item. The amount will be verified by Korecki Real Estate and adjusted as required

Delivery Method (Select One)

- In Person Pickup Email _____

Additional Information (Form F Only)

Purchaser(s) First & Last Name(s): _____

P.I.D #: _____ Will the purchaser be residing at this address? Yes No

If No Complete Non-Resident Address: _____

City: _____ Province: _____ Postal Code: _____

Phone: Home _____ Cell _____ Work _____

E-mail: _____

Visa Card Authorization

Visa Card Number: _____ - _____ - _____ - _____ Expiry Date: ____ / ____

Card Holders Name: _____ Date: _____ Signature: _____

We/I hereby authorize Korecki Real Estate Services to charge my/our fees for the total amount listed under "Total of All Fees" plus applicable taxes. I/We hereby acknowledge that if I/we have made an error in calculating the "Total of All Fees" Korecki Real Estate Services may adjust the number accordingly and charge the newly adjusted "Total of All Fees" without further notification to me/us.

Acknowledgements

We/I hereby confirm that We/I am the registered owner(s) of the above property or an Agent(s) authorized by the owner(s) and entitled to receive the requested documents. I understand that as a Realtor and/or an appointed Agent, I will be required to provide documentation proving that I have been authorized by the owner(s) to request these documents. I further agree to pay the charges in full upon placement of the order and understand that this order is non-refundable once processed.

Name: _____ Date: _____ Signature: _____

*Please completed in full, sign and email to the address below.