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| **Strata** | | **Community**  **or BMC** | **Company Title** | | **Building / Defects** | **Timber Pest** |  | | |  |  | | |
| 🞎 | | 🞎 | 🞎 | | 🞎 | 🞎 |  | | |  |  | |
| Report Ordered by: | | | | | | | | Account Code: | | |
| Firm Name: | | | | | | | | File Reference: | | |
| Address / DX: | | | | | | | | | | |
| Email/s: | | | | | | | | | | |
| Phone: | | | Mobile: | | | | Fax: | | | |
| If you wish to arrange payment via credit card please call us on 02 9420 9011 and we will process your payment securely. | | | | | | | | | | |

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| **Purchaser:** | | | **Vendor:** | | | |
| **Property Address:** | | | | | | |
| **Title Details** (if Applicable) | **Lot(s)** |  | | SP/DP |  | |
| **Additional title details where Community or BMC included** | **Lot(s)** |  | | DP |  | |
| Building Name/Company Name: | | | | | | Shares: |
| Settlement Date: | | | | | Purchase Price: | |

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| **Vendors Solicitor:** | Phone: |
| Firm: | Email: |
| Contact Name: |  |

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| **Records Inspections** Managing Agent/Strata/Secretary: | Phone: |
| Address: | Email: |

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| **Site Inspections** Selling Agent/Contact: | Phone: |
| Address: | Email: |

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| **Special Instructions**: |
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