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## **CONVEYANCE FORM CONTRACT**

	SALE	TRANSFER OF	TITLE	REFINANCE
NAME:		COMPANY:		
ADDRESS:				
TEL#:		EMAIL:		
DATE OF REQUEST:		DATE REQUIRE	:D:	
COMPLETION DATE:		POSSESSION D	ATE:	
LEGAL DESCRIPT	ION:			
STRATA PLAN #:		UNIT #:	STRATA LOT #: _	
P.I.D. #:	LEGAL DESCRIPTION:			
VENDOR(S):				
PURCHASER(S):				
Residing in unit? Y	ES NO	If no, please	e provide a mailing addres	s & phone number
FORM(S) REQUEST	<u>ED</u> Form	B - \$35.00 plus GST	Forr	n F - \$15.00 plus GST
				tion, pursuant to Section 59
	Act, unless specified other			
If you would like the	se forms on a <b>RUSH</b> basis,	please specify: RUSH Cost	<u>:s below</u> .	
	ONE BUSINESS DAY - Co (24 hours from receipt of form		TWO BUSINESS DAY (48 hours from receipt of	
	3 to 4 business days - C	ost \$200.00	5 to 6 business days	- Cost \$175.00
DELIVERY OPTIONS:	Mail	(Postage Fees Applicable)	Email	(Complimentary)
	Pick up at our Office:		(\$10.00 service fee)	
Please Note: Rush Fe	es indicated are binding and	are in <u>addition</u> to the costs	of providing the forms and c	opies.
<b>We accept etransfer a</b> The order invoice will b	nd cheque for payment. De prepared and sent in adva	Etransfer nce. Etransfer instructions v	Cheque will be supplied at that time.	
Security Question:		Security Answer:		
NAME:	SIC	SNATURE:	D	ATE: