

LAND ORDER FORM

Please print all information

I would like to purchase Parcel#

Enclosed is my downpayment of \$

Should this property already be sold, my optional choice is Parcel#

PERSONAL INFORMATION Please print

First Name: Last Name:

Address: Apt/Unit#

City: Prov./State Postal/Zip

Country:

Business Phone: () -

Residence Phone: () -

Mobile Phone: () -

Email:

Purchase Method

I would like to pay CASH and receive my 10% DISCOUNT.

I intend to pay CASH and will send the balance as soon as you notify me that my order has been accepted.

I would like a MONTHLY PAYMENT PLAN.

I will pay in monthly payments, and will send you the first payment one (1) month from today, and the other payments every month thereafter.

I am 18 years of age or over. I have carefully read over 'RURAL ACREAGE INFORMATION YOU SHOULD KNOW BEFORE YOU BUY', and agree to the Terms and Conditions contained therein.

Payment Method

Cheque/Money Order/Bank Draft

E-Transfer

Date:

Signature: