



PARKSIDE
VILLAGE®
MISSISSAUGA

PURCHASER INFORMATION FORM

Suite #: B9N #1508

Purchasers
Name(s): Pinhas Ben-Tzvi

Purchasers
Address: _____

Tel:
(Daytime): _____

(Cell): _____

Email
Address: _____

PURCHASER'S SOLICITOR INFORMATION

Name: _____

Firm: _____

Address: 400 MAIN ST. E #209 MILTON L9T 4X5

Tel: 905-878-8123

Fax: 905-878-2555

Email: _____

9 NORTH # 1508

Please return the completed form to:

PARKSIDE VILLAGE SALES TEAM

465 Burnhamthorpe Road West | Mississauga | ON | L5B 0E3 | 905.273.9333
FAX: 905-273-7772 EMAIL: SUPPORT1@LIFEATPARKSIDE.COM
LIFEATPARKSIDE.COM

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