

DATE
30/05/2021

TIME
06:46 pm

INITIAL SALES REPRESENTATIVE NAME:

BROKER DETAILS

PRIMARY AGENT FIRST NAME:
Emil

PRIMARY AGENT LAST NAME:
Kiriakos

PRIMARY AGENT EMAIL:
emilkiriakos@gmail.com

PRIMARY AGENT PHONE:
416-317-7354

PRIMARY AGENT BROKERAGE:
Century 21 Dreams INC

SUITE PREFERENCE

FLOOR PREFERENCE
High

MODEL NAME
Ash-T

2ND FLOOR PREFERENCE
High

2ND MODEL NAME
Maple

PURCHASER INFORMATION

PURCHASER SURNAME/LAST NAME:
Nasim

PURCHASER FIRST/GIVEN NAME: (MR. MRS. MS.)
George / Fouad

ADDRESS:
903 Scott Blvd

CITY:
Milton

COUNTRY
Canada

POSTAL CODE:
L9T7C5

RESIDENCE PHONE:
(289) 971-7870

CELL PHONE:
(289) 971-7870

EMAIL:
gnasim3000@gmail.com

EMPLOYER
Region of Waterloo

OCCUPATION
Engineer & Elec

DATE OF BIRTH:
11/06/1985

FRONT OF DRIVER'S LICENSE
• IMG_20210330_182248_011-6.jpg

BACK OF DRIVER'S LICENSE
• IMG_7392.JPG

SECOND PURCHASER INFORMATION

PURCHASER SURNAME/LAST NAME:
Nasim

PURCHASER FIRST/GIVEN NAME: (MR. MRS. MS.)
Mary, Samir

ADDRESS:
903 Scott Blvd

CITY:
Milton

COUNTRY
Canada

POSTAL CODE:
L9T7C5

RESIDENCE PHONE:
(905) 902-1986

CELL PHONE:
(905) 902-1986

EMAIL:
gnasim3000@gmail.com

EMPLOYER
Halton

OCCUPATION

UHN
University Health Network

(doubled up)
attiam2@gmail.com
Nasims2be@gmail.com
Zoom ID verification
Completed by
Sharon Naraine
June 22/21

Clinical Research

DATE OF BIRTH:

10/21/1986 ✓

FRONT OF DRIVER'S LICENSE

- IMG_20210330_182248_011-61.jpg

BACK OF DRIVER'S LICENSE

- IMG_73921.JPG