CONCORD GARDENS APPOINTMENT OF DELEGATE FORM

PROJECT ADDRESS:				
Strata Lot:Suite	No.:			
Suite Address:				
SECTION (I): PURCHAS	ER'S PARTICULARS			
Name:				
`	ers' names in Offer To Purchase	,		
Telephone:	(H)		(O)	(Cell)
Fax :	Email : (REQUIR	ED)		
**Please Provide a Daytim	e Address for Courier Deliv	ery (Home or Office)		
Daytime Courier Address:				
Apartment's Enterphone Coo	de (Buzzer #):	(For courier purposes)		
SECTION (II): KEY PICH	K-UP OPTIONS (Please tie	ck as appropriate)		
		•	ne above mentioned premises an	• • • •
	the key package. I fully u		s my agent to assume possession presentation of appropriate iden	
Name of Agent :				
Address :				
			(Cell) Fax :	
SECTION (III): PLEASE	FILL IN THE BOTTOM P	ORTION		
Purchaser's Signature:	rchaser's Signature: Purchaser's Name (Print):			

Please complete and return by mail or fax to: Customer Care Centre

Fax: (604) 899-9183

Email: customercare@concordpacific.com

Mail To: ATTN: CONCORD GARDENS LIMITED PARTNERSHIP 9thFloor - 1095 West Pender, Vancouver, B.C. V6E 2M6