EXPRESSION OF IN	TERES	ST			DEAL EST
Purchasers to use this form to make a no for a Sale and Purchase Agreement	on-binding of	fer and to p	rovide information	d	Adak
Agent Name: Alison - 022 042 8717 / Sarah - 022 569 9640 Agent Email: alison@yourrealestate.co.nz / sarah@yourrealestate.co.nz					
Purchasers to Complete Name (full legal Name/Company/Trust):					
Email	Mobile:				
Purchase Price \$					
Deposit (\$ amount or % amount) _					
Conditions of Sale:	Working Days (wd): (Circle)				
Solicitor Approval & Title		3 wd	5 wd	10 wd	15 wd
Finance	NO	3 wd	5 wd	10 wd	15 wd
	NO	3 wd	5 wd	10 wd	15 wd
Building Report	NO	3 wd	5 wd	10 wd	15 wd
Council File	NO	3 wd	5 wd	10 wd	15 wd
Toxicology Report	NO	3 wd	5 wd	10 wd	15 wd
Sale of own Property (if so Address &	Date to be	sold by):			
Add Better Offer clause Vendors	decision. Ho	owever, likely	v added, if conditions	are longer th	an 7wd.
Proposed date of Settlement/Posses	sion:				
Solicitor Company:					
Solicitor Individual Acting:					
Purchaser Signature:	Date:				
Purchaser Signature:			Date	:	

If this currently is, or becomes, a multi offer situation, a multi offer form will also need to be completed