ARBOUR RESIDENCES

THE HEIGHTS

Expression Of Interest

Date:			
Sunland Agent:	Name:		
	Phone:	1300 826 939	
Potencial (A)	None	A No	
Referrer/Agent(s):	Name:	Agency Name:	
Interested Party(ies):	First Name/s:	Surname:	
Full name of each Buyer required.	First Name/s:	Surname:	
	Company:		
	Address:		
	Phone:	Mob:	
	Email:		
	ABN:	Tax File No:	
	Foreign Buyer:	Yes / No Investor / Owner Occupier (please circle)	
Guarantors:	Name:		
	Address:		
	Name:		
Must be included if the buyer is a company or Trustee. All directors must provide guarantees.	Address:		
Interested Party's	Name:		
Solicitors:	Address:		
	Phone:	Fax:	
	Email:		
Property: Please list property number.	Lot number: Arbour Residences		
Purchase Price:	\$		
Holding Deposit:	\$5,000.00 payable on signing this Expression of Interest (payable to Hickey Lawyers Trust Acount)		
Contract Particulars:	Proposed Settle Balance of Dep Balance of Dep	oosit Payable: \$ Finance Due Date:	
Contract Delivery:	Please send co	ntracts to: Solicitor Buyer Agent	
Notes:			

PLEASE DELIVER COMPLETED FORMS TO SUNLAND GROUP

This Expression of Interest is not a binding commitment and no contract is formed until the contract documentation is properly completed and signed. The Holding Deposit is completely refundable if you or the Seller choose not to progress to sign the contract of sale. I/we authorise Hickey Lawyers to allocate the Holding Deposit as part payment of the Deposit under the Contract of Sale in the event that a Contract of Sale is entered into by me/us.



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Conditions:	I/We request Coomera Ridge Pty Ltd ACN 118 899 228 (the Seller) to prepare and issue a Contract of Sale on the following basis:				
	a) I/We acknowledge that I/we may not be the only person/people interested in the above mentioned property/properties and the signing of this Expression of Interest does not confirm in any way that I/we will be invited to enter into a Contract of Sale. Once the Expression of Interest is countersigned by Coomera Ridge Pty Ltd ACN 118 899 228 below, a contract for the nominated property will be issued to the Interested Party.				
	b) I understand that the initial deposit paid by me/us remains fully refundable until the Contract of Sale is properly completed and signed by both parties.				
	 c) Once contract documentation is sent to you, we will give you a period of seven (7) working days to sign and return the contract(s). The balance of the deposit being 10% or 20% (for FIRB Buyers) of the purchase price of the property must be paid within fourteen (14) days from the date of the Contract of Sale. d) You will pay the deposit under the Contract of Sale by either cash, bank cheque or bank guarantee. If payment of the deposit is to be made by a bank guarantee, it is to be made out in favour of Hickey Lawyers. 				
					e) If the Contract of Sale is not received by the Seller within seven (7) working days, your rights under the Expression of Interest will expire and the property will be released for sale by us and all monies paid by you shall be refunded in full.
	f) If the Buyer under the Contract of Sale is a company not listed on the ASX or a trust, guarantees will be required from the directors of the company and also the beneficiaries of the trust.				
		g) I/We understand that we will be required to arrange finance (if applicable) in the terms as set out in the Contract and to complete the purchase as per the contract.			
Signed by the Interested Party(ies):					
Date:					
Signed on behalf of Coomera Ridge Pty Ltd ACN 118 899 228 Date:					
	Should you have any queries regarding your deposit, please contact Arbour Residences sales office on 1300 826 939.				
Payment made by: (please tick one)	Bank Deposit Credit Card Cheque For Credit Card, please fill in Credit Card Authorisation Form				
For bank deposts our Trust Account details are as follows:	Account Name: Hickey Lawyers Trust Account BSB: 064-430 Account No: 10559695 Bank: Commonwealth Bank of Australia Swift Code: CTBAAU2S				

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Credit Card Autho	orisation	
Date:		
То	Hickey Lawyers PO Box 5559 Gold Coast Mail Centre Bundall QLD 9726 ph. 07 5574 1000	
	f. 07 5574 1130	
Re:	LotArbour Residences	
1/We (Name):		
Address:		
Phone:		Mobile:
Card Type:		w amount to be debited to the following credit mpany my/our Expression of Interest on the
Card Number:		
Expiry Date:	/	
Amount to be Debited:	AUD \$5,000	
Card Holders Name		
Card Holders Signature		
For Bank Deposits:	Account Name: BSB: Account No: Bank: Swift Code:	Hickey Lawyers 064430 10559695 Commonwealth Bank CTRAALI2S

Please quote matter and surname as a reference and provide a copy of the deposit transfer receipt