

STRATA INSPECTION ORDER FORM

CONTACT DETAILS

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|---------------------------|
| DATE: |
| NAME: |
| PHONE NUMBER: |
| EMAIL: |
| PURCHASER'S NAME: |
| PURCHASER'S EMAIL: |
| PURCHASER'S PHONE NUMBER: |

PROPERTY DETAILS

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|-----------------------------------|
| STRATA PLAN No: |
| LOT No: |
| PROPERTY ADDRESS: |
| VENDOR: |
| MANAGING AGENT: |
| DATE REQUIRED/COOLING OFF PERIOD: |

**PLEASE ATTACH LETTER OF AUTHORITY FROM THE VENDOR OR THE
VENDOR'S SOLICITOR/CONVEYANCER**