

TRUST ACCOUNT DEPOSIT FORM

PLEASE ENSURE ALL SUPPORTING DOCS ARE ATTACHED

LEAD AGENT (*Only 1)	DATE RECIEVED	OFFER DATE
----------------------	---------------	------------

Property:
Address: Unit/Suite:
City:
Province:

VENDOR/
LANDLORD

PURCHASER/
TENANT

**Please do not provide Cushman & Wakefield Edmonton contact info
**Please indicate the other Brokerage below if applicable

**Please do not provide Cushman & Wakefield Edmonton contact info
**Please indicate the other Brokerage below if applicable

C/O:

C/O:

Phone:

Phone:

Contact:

Contact:

Address:

Address:

City:

City:

Province:

Province:

Postal:

Postal:

AGENCY DISCLOSURE: Vendor/Landlord Purchaser/Tenant

Deposit Amount: Who is the cheque from?

Initial Deposit Additional Deposit

Interest Earning Non-Interest Earning
--

Conditional Offer Unconditional Offer (condition removals enclosed)
