

FORM B/F INFORMATION REQUEST WHISTLER RESORT MANAGEMENT LTD.

202-1410 Alpha Lake Road, Whistler, BC V0N 1B1

Ph: 604-932-2972

Fax: 604-932-2756

STRATA PLAN _____ STRATA LOT# _____ PID NUMBER: _____

DATE REQUESTED: _____ DATE FORM REQUIRED★: _____

SALE FROM (VENDOR NAME): _____ COMPLETION DATE: _____

SALE TO (**FULL** purchaser **CONTACT INFORMATION**, including mailing address): _____

FORMS REQUESTED: Copies: \$0.25/page	B	F	BF	SERVICE ☆
	\$39.20	\$16.80	\$56.00	REGULAR (7 days)
	\$78.40	\$33.60	\$112.00	RUSH (3 TO 6 days)
	\$117.60	\$50.40	\$168.00	48 HOUR (within 48)
	\$184.80	\$162.40	\$347.20	24 HOUR (same day)★

Please check if you require minutes, financials & bylaws (all documents will be sent at the same time upon completion of the form).

Note: monthly fees are **not** supplied with a Form **F** only request.
 To ensure accuracy, ***NO verbal information*** will be provided without going through the process of completing the form.
 ★ For Same Day Service, we must receive your request in by **10:00am** – We recommend a follow up call to ensure receipt of same day requests.

YOUR COMPANY NAME: _____

BILLING ADDRESS: _____

CONTACT PERSON IN YOUR OFFICE: _____

PHONE: _____

FAX: _____

EMAIL: _____

WRM Office Use Only

INSURANCE AGENT: _____ PROPERTY AGENT: _____

IS PROPERTY IN Y/E? _____ WHEN IS Y/E _____ AGM OR SGM DATE? _____

STRATA FEES _____ PER (CIRCLE ONE): MONTH QUARTER SEMI - ANNUM

BASED ON: (CIRCLE ONE) ACTUAL LAST YEAR PROPOSED FEES? _____

AMOUNT OWING \$ _____ AS OF _____

FUTURE SPECIAL ASSESSMENT? \$ _____ FOR _____ DUE ON _____

DEFICIT? _____ AS OF _____

CONTINGENCY _____ AS OF _____

(F ONLY) PAP REMOVED **OR** PDC PULLED **OR** TRANSFER ONLY

Form delivery instruct's:

e-mail

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Call for courier