



O'Connors Property Reports Order Form

Strata	Community or BMC	Company Title	Building / Defects	Timber Pest	Survey	Valuation
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Report Ordered by:		Account Code:
Firm Name:		File Reference:
Address / PO Box:		
Email/s:		
Phone:	Mobile:	Fax:
Credit Card # _____		Expiry Date: ____ / ____
(Required if not ordering on Solicitor or Conveyancer's account)		Security # _____

Purchaser:	Vendor:			
Property Address:				
Title Details (if Applicable)	Lot(s)		SP/DP	
Additional title details where Community or BMC included	Lot(s)		DP	
Building Name/Company Name:			Shares:	

Vendors Solicitor:	
Firm:	Phone:
Address/PO Box:	Fax/Email:

Records Inspections	
Managing Agent/Strata/Secretary:	Phone:
Address:	Fax/Email:

Site Inspections	
Selling Agent/Contact:	Phone:
Address:	Fax/Email:

Special Instructions:

Deliver Reports by: Email Fax Post