

Expression of Interest Form (EOI)

Aviate Project Marketing Pty Ltd
ABN 56 110 175 310

Client Services

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Complete this form to reserve an apartment in **Mero Apartments**.

- Please read the "How to show interest" section before completing this application
- Follow the instructions to complete Expression of Interest Form
- Please print clearly in capital letters using black or blue pen

1. APPLICANT DETAILS

APPLICANT 1

Full Name

POSTAL ADDRESS

Address Line 1

Address Line 2

State/
PostCode

PHONE NUMBERS

Home Phone Area Code

Work Phone

Mobile

Main Contact
Email Address

APPLICANT 2

Full Name

Address Line 1

Address Line 2

State/
PostCode

Home Phone Area Code

Work Phone

Mobile

2. SOLICITOR DETAILS (must hold a certificate in the jurisdiction where the property is situated)

Firm

Name of Solicitor

Address State PostCode

PHONE NUMBER

Area Code

FAX NUMBER

Area Code

Email Address

A note from aviate group

This document does not constitute a binding agreement to sell or purchase an apartment in **Mero Apartments**. It merely constitutes an Expression of Interest. Subject to finalisation of pre-contract matters and formalities, a Contract of Sale will be forwarded to your nominated party for review.

3. PROPERTY DETAILS

A. LOT NO

Preference 1

Preference 2

Preference 3

Preference Price (inc GST)

B. DEPOSIT *

Holding Deposit (payable on signing this EOI)

Trust Name: | HS (CBN) Pty Ltd
Sales Trust Account

Bank: | Macquarie Bank

BSB: | 183 334

Account: | 301 679 742

*The Holding Deposit is fully refundable if you decide not to proceed with the purchase. Please fax / scan a copy of your **\$1,000 Holding Deposit Transfer** to Aviate Group with this form.

I/We will pay the Total Deposit (10% of the purchase price) by (please tick)

Cash
Deposit

Bank
Guarantee

Total Deposit (10% of the purchase price) on exchange

Balance (payable on settlement of contracts to purchase the property)

C. PURCHASER'S INTENDED USE OF PROPERTY

Investor

Owner-occupier

D. FINANCE

 Contracts will not be subject to finance.

E. GUARANTOR/S

Name

Address

Suburb

State

PostCode

Phone Number

Mobile

F. CONTRACT OF SALE DELIVERY INSTRUCTIONS

Purchaser

Solicitor

G. SIGNED BY YOU

Write Full Name

Signature

Date

EXPRESSION OF INTEREST TERMS AND CONDITIONS

1. I/We attach a cheque for \$1,000 (the Holding Deposit) made payable to the vendor Solicitors Trust Account: *HS (CBN) Pty Ltd Sales Trust Account*, for the *24-26 Merri Street, Brunswick*, (the Development) as an expression of my interest in acquiring an apartment in the Development.
2. I/We acknowledge that the Holding Deposit will be held by the Vendor in its trust account on trust for me/us and, provided that the funds are cleared, is refundable to me/us without deduction within 7 days of the Vendor's Solicitors receiving a written request from me/us, subject to condition 4.
3. I/We acknowledge that I/we am/are not entitled to any interest which accrues on the Holding Deposit.
4. If I/we enter into a Contract of Sale for an apartment in the Development, the Holding Deposit will be applied against any deposit required on exchanging contracts to purchase the apartment. If I/we decide not to enter into a Contract of Sale, and inform the Vendor's Solicitor accordingly in writing, the Holding Deposit will be returned to me/us as set out in condition 2.
5. I/We acknowledge that:
 - The Vendor has no obligation to agree to sell an apartment in the Development, to me/us, and may refund the Holding Deposit to me/us in its sole discretion and at any time without being required to justify or explain such action;
 - Aviate Project Marketing and its employees, representatives and agents are not liable to me/us as a result of any information, statement, warranty, representation, letter, document or arrangement or any conduct provided, made or done by or on behalf of the Vendor;
 - The information provided in relation to any apartment in the Development, including its price, is indicative only and may be changed at any time prior to the exchange of Contracts of Sale in relation to an apartment; and
 - I/we may not make any objection or claim compensation relating to such a change.

Interested Party's initials _____

Office Use Only

Alliance Company Name

Alliance Referrer

Alliance Commission Structure

FORM TO BE FAXED TO
02 9331 5800

OR SCANNED TO
info@aviategroup.com.au