

OFFICE USE  
Attach bank deposit stub here

# Reservation Agreement/Deposit confirmation

## Applicant details

### Applicant 1

Mr  Miss  Mrs  Ms

First name:

Surname:

D.O.B.:

 /  / 

### Applicant 2

Mr  Miss  Mrs  Ms

First name:

Surname:

D.O.B.:

 /  / 

Address:

Suburb:

State/Territory:

Postcode:

Telephone:

Mobile:

## POA/Family contact:

Family Member  Friend  Carer  Other

Full name:

Address:

Suburb:

State/Territory:

Postcode:

Telephone:

Mobile:

Email:

The Applicant hereby registers their interest in proceeding with the purchase of a unit at a Sunrise Supported Living Community, subject to the conditions below.

Unit Number:

Unit Price (\$):

Date:

 /  / 

Deposit Amount:

Unit type:

Car park required:

Yes  No

General Service Fee (\$):

p.w.

Conditional sale:

Yes  No

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## Conditions

The signing of this Reservation Form on a home at **Sunrise Supported Living** allows you to reserve that home for a period of **seven days**. Sunrise Supported Living will prepare an Application for Residence on the nominated home. If you do not acknowledge receipt of the Application for Residence, the home can be offered to another party.

**NOTE:** If, after admission interview and a review of the Resident Admission Form returned by the Applicant(s) prior to admission, the care provider is unable to meet the medical and care needs of the Applicant(s), Sunrise Supported Living may, terminate the Application. In this case all money's paid by the Applicant(s) will be refunded by Sunrise Supported Living's solicitor.

The signing of this document is further proof that Sunrise Supported Living has received a deposit payment for a home in our village.

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## SIGNED:

**Applicant 1:**

**Witness:**

**Date:**

**Applicant 2:**

**Witness:**

**Date:**

**Consultant:**

**Date:**

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## Bank details

BSB: 034-002

Ac. No. 487313