

# **Unit 21 Shared Ownership Nomination Form**

Name : \_\_\_\_\_

Address : \_\_\_\_\_

\_\_\_\_\_ Post Code : \_\_\_\_\_

Home Phone : \_\_\_\_\_ Mobile : \_\_\_\_\_

E Mail : \_\_\_\_\_

**Deposit of \$1000 : Please tick method of payment**

Cheque \_\_\_\_\_

Credit Card : \_\_\_\_\_

Cash : \_\_\_\_\_

**If for any reason you do not exchange or the unit does not exchange  
your \$1000 is totally refundable**

**All monies will be deposited in Unit 21's Star of the Sea Trust Fund**

Signed : \_\_\_\_\_ (Nominated Share holder)

Signed : \_\_\_\_\_ ( Bob Lloyd Trustee )