



EXPRESSION OF INTEREST FORM

Thank you for your interest in purchasing a property that is listed for sale by KR Property in conjunction with **Harvest Rural Real Estate**

Please find below a form to complete with your details for the Expression of Interest. All Expressions of Interest (EOIs) must be submitted on this form by the closing time/date to be valid to kim@krproperty.com.au_or luke@harvestaa.com.au. Please note this form is to advise of an expression of interest and is non-binding.

Once submitted, you will receive a confirmation email that the agent has received your form.

All EOIs will be submitted to the Vendor for consideration. If your offer is deemed preferable by the Vendor, it will then proceed to a formal contract.

All applicants will be notified of the outcome of their EOI.

"WERONA & ROSMAR" 203 Bakers Road, Gunnedah NSW 2380 **Property:**

Expression of Interest Closing Date: 10AM AEST 1/10/2024

| Attention: | Kim Rozendaal | Luke Kenniff |
|------------|-------------------------|---------------------------|
| | KR PROPERTY NSW PTY LTD | HARVEST RURAL REAL ESTATE |
| | 0407 835 207 | 0409 992 715 |
| | kim@krproperty.com.au | luke@harvestaa.com.au |

PURCHASER

Person or Company Name:

ABN/ACN (if applicable):

Significant Shareholders/Directors (if company):

| Contact | Person: |
|---------|---------|
| | |

Mailing Address:

Email Address:

Telephone:

Mobile:

Fax:

OFFER

Purchase Price (A\$):

Deposit:

Exchange Date:

Settlement Date:

CONDITIONS OF PURCHASE (IF ANY)

Attach separate sheet if required.

□ Subject to Finance Approval

- □ Subject to Building Inspection
- □ Subject to Pest Inspection
- Other Special Conditions (please specify):

PURCHASER'S SOLICITOR/CONVEYENCER

| Firm Name: | |
|------------------|---------|
| | |
| Contact Person: | |
| | |
| Mailing Address: | |
| | |
| Email Address: | |
| | |
| Telephone: | Mobile: |

PURCHASER'S LENDER (if applicable)

| Company Name: | |
|------------------|---------|
| | |
| Contact Person: | |
| | |
| Mailing Address: | |
| | |
| Email Address: | |
| | |
| Telephone: | Mobile: |
| | |

Is proof of capacity to fund and/or financial bonafides being provided? Yes \Box No \Box

SIGNATURE/ACKNOWLEDGEMENT

Signature:

Name (please print):

Company Name (if applicable):

Date: