

CONFIRMATION OF RECEIPT OF DOCUMENT/S

Item

Item Schedule

1. AGENT

Name: _____

Address: _____

Phone: _____ Fax: _____ Mobile: _____

Email: _____ Contact: _____

2. RECIPIENT/S

Name/s:

Address:

Phone: Fax: Mobile:

Email:

Recipient is:

☐ Tenant of the Premises at:

☐ Other:

3. RECIPIENT'S CONFIRMATION OF RECEIPT OF DOCUMENT/S

I/we (the Recipient/s) confirm that I/we have received from the Agent the following document/s:

[illegible]

Method of Receipt:

Once you (the Recipient/s) have received the document/s, complete & sign this form and return to:

The Agent by: ☐ Fax ☐ Normal Post ☒ Express Post ☐ Registered Post
☐ Other Method:

Mark Attention to:

4. SIGNATURES

Signatures of Recipient/s	Print Name	Date
1)
2)
3)
4)