

Year:_____

Sale Of Property	
Client Name:Soc	cial Insurance Number:
Co- Owner Name:	Social Insurance Number:
Main Owner Share:	Co-Owner Share:
If the Property was your Pricipal residence:	
Date Of sale:	
Year of Acquisition:	_
Proceeds Of Disposition or Deemed Dispostion:	
If the Property was your Rental / Investment	/ Inherited Property:
Information Related to sale:	
Date Of sale:	
Sale Price:	
Legal Fees:	
Real Estate Fees:	
Mortgage Discharge Fee / Penalty:	
Information Related to Original Purchase (In	herited):
Date Of Purchase (Inherited):	
Purchase Price (Deemed value on date of Death)):
Legal fees / Disbursements:	
Real estate Fees:	
Land Transfer Tax:	
Major Improvements not previously claimed:	