

## PROXY APPOINTMENT FORM

Date:							
I/We							
the ow	ner of lot(s):		in	Strata Plan No			
appoint	t		or Chairperson of				
as my/c	our proxy for	the purposes of r	neetings of the owners cor	poration (includ	ing adjournments of meet	ings).	
appoint	t		or Chairperson of				
			of meetings of the ow already ho				
Period	or number of	meetings for wh	ich appointment of proxy l	nas effect			
* 1 mee	eting [ ] / * .	months [ ]	/ * 12 months or 2 consection *Tick or tick and complete *Tick or tick or tick and complete *Tick or tick or tick or tick or tick and complete *Tick or tick				
(Note:	The appointment cannot have effect for more than 12 months or 2 consecutive annual general meetings, whichever is the greater.)						
*1	This form a	This form authorises the proxy to vote on my/our behalf on all matters.  OR					
*2							
	Motion 1	Yes/No	Motion 2	Yes/No	Motion 3	Yes/No	
	Motion 4	Yes/No	Motion 5	Yes/No	Motion 6	Yes/No	
	Motion 7	Yes/No	Motion 8	Yes/No	Motion 9	Yes/No	
	Motion 10	Yes/No	Motion 11	Yes/No	Motion 12	Yes/No	
	Motion 13	Yes/No	Motion 14	Yes/No	Motion 15	Yes/No	
	Motion 16	Yes/No	Motion 17	Yes/No	Motion 18	Yes/No	
(Specify	the matters a	nd any limitations o	n the manner in which you wa	ant the proxy to vo	te - Should more details need	I to be included please	
attach	instructions	to this proxy)					
*Delete	paragraph 1 o	r 2, whichever does	not apply.				
*4		d that, if the proxy a behalf on any matte	already holds more than the prs.	permitted number	of proxies, the proxy will not	be permitted to vote	
Signatui	re of owner/s						