

A P P L I C A T I O N F O R M

Applicant 1

Full Name (Block Letters)

Occupation/Profession

Father's/Husband's Name

Occupation/Profession

Applicant 2

Full Name (Block Letter)

Occupation/Profession

Father's/Husband's Name

Occupation/Profession

Permanent Address

Correspondence Address

..... Fax

Phone Mobile email

Nationality 1 2

Date of Birth 1 2

Preference Project Name Apt Type

Floor Size Reserved Car Park No

A P P L I C A T I O N F O R M

Declaration

I/we hereby declare that the information provided by me/us herein is true to the best of my/our knowledge and belief. I/we further declare that I/we have gone through the terms and conditions of the allotment of apartments and accept the same.

I/we agree to become a member of the Apartment Owner's Association and abide by the rules and regulations of the Association.

.....
Signature of the Applicant 1
Date :

.....
Signature of the Applicant 2
Date :

For Official Use Only
Reference :